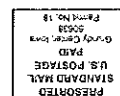


MISSOURI

STATE BOARD OF NURSING

NEWSLETTER



The Official Publication of the Missouri State Board of Nursing with a quarterly circulation of approximately 98,000 to all RNS and LPNs.

Volume 2 No. 1

February, March, April 2000

MESSAGE FROM THE PRESIDENT

Patricia Versluis, RN
President, Missouri State Board of Nursing

HATS OFF TO LINDA STROBEL



Linda Strobel, Accounting Clerk/Personnel Officer of the Board of Nursing was honored at the Division of Professional Registration's 25th anniversary reception on December 20, 1999. Linda's employment with the Board of Nursing began on September 5, 1973 with the position of accounting clerk. Although she has had other duties such as interstate licensure and fiscal assistant to the Executive Director, she has held her current position since 1984.

In her tenure with the Board of Nursing, Linda was recognized as the first Employee of the Month for the Division of Professional Registration. She has also received two special recognitions for her many years of employment with the Board of

Nursing. Over the years she has seen many changes in nursing and administration with the Board of Nursing and the Division of Professional Registration. She has worked for five Board of Nursing Executive Directors and two acting Executive Directors of the Board of Nursing and nine Professional Registration Division Directors. She also helped move the Board into four different locations over the years.

When asked what major changes she has seen, Linda commented: "In 1973 when I started working for the Board there were only ten employees, 35,475 RNs and LPNs and we had to do everything by hand; now we have 25.5 employees, 96,641 RNs and LPNs and everything is automated by computers. I believe that we have improved the licensure processing time and have better communications with licensees, professional organizations, and the public."

Mrs. Strobel and her husband have two daughters, Tammy Siebert and Sandra Wyss, and four grandchildren. In her spare time she is an avid collector of "Precious Moments" and enjoys being with grandchildren and family.

The Missouri State Board of Nursing is proud of Linda Strobel!



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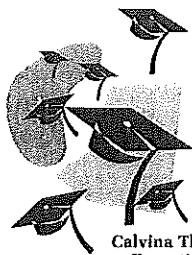
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Calvina Thomas, PhD, RN



Calvina Thomas, PhD, RN
Executive Director

Education Corner



Calvina Thomas

Missouri State Board of Nursing Education
Committee Members:

- Patricia Porterfield, RN, MSN; Chair
- Janet Anderson, RN
- Ian Davis, LPN
- Cordelia Esry, PhD, RN
- Charlotte York, LPN

Congratulations goes to Patricia Jentsch of Tebbetts, Missouri, who has been selected by the Examination Committee of the National Council of State Boards of Nursing to serve as an NCLEX-PN® examination item writer panel member for the session, February 23-27, 2000 in Princeton, New Jersey.

Congratulations goes to Rose Utley of Springfield, Missouri, who has been selected by the Examination Committee for the National Council of State Boards of Nursing to serve as an NCLEX-RN® examination item writer for the session, February 2-6, 2000.

They have offered to assist in the preparation of the licensure examination by writing test items.

This is a unique contribution to the nursing profession through their participation in this activity.

Congratulations also goes to Sandra Kae Berger of Heartland Regional Medical Center for serving as an RN item review panel member in the last quarter, September 12-15, 1999, and Diane M. Chudomelka of Waynesville Technical Academy for serving as a PN item writer panel member from September 29 - October 3, 1999.

We want to say thank you to these people for the donation of their time and expertise and hope to have more selected in the future.

Also, the Governor's Award for Excellence in Teaching was presented on December 9, 1999, in St. Louis to top faculty members from colleges and universities throughout the state. According to the requirements set forth by Governor Mel Carnahan the recipient must nurture student achievement and hold standards of teaching excellence. We want to congratulate Linda Conner who is a lead instructor for the ADN program and a clinical instructor at Moberly Area Community College. Conner's students think very highly of her abilities as an instructor. Congratulations, Linda!

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DISCIPLINARY ACTIONS **

Pursuant to Section 335.066.2 RSMo, the Board "may cause a complaint to be filed with the Administrative Hearing Commission as provided by Chapter 621, RSMo, against any holder of any certificate of registration or authority, permit, or license required by sections 335.011 to 335.096 or any person who has failed to renew or has surrendered his certificate of registration or authority, permit or license" for violation of Chapter 335, the Nursing Practice Act.

Please be advised that more than one licensee may have the same name. Therefore, in order to verify a licensee's identity, please check the license number.

Listed below are individuals who were issued an initial probationary license or disciplined by the Board during the previous quarter with reference to the provisions of the Nursing Practice Act that were violated and a brief description of their conduct.

INITIAL PROBATIONARY LICENSE

Name	License Number	Violation	Effective Dates
KAREN S. CULLISON KANSAS CITY, MO	RN 1999 134 587	335.066.1 and .2 (5) (12) RSMo. Licensee signed out four doses of Demerol for a patient without a doctor's order and documented that she wasted 2 doses and the other 2 doses were unaccounted for. Performed two Morphine IV pushes on patients when licensed as an LPN.	9/28/99 TO 9/28/01
JOSEPH E. GRAHAM KANSAS CITY, MO	PN 2000 143 395	Section 335.066.1 and .2 (1) (2) RSMo. 11/3/87-Pled guilty to stealing. 9/12/89- Pled guilty to felony burglary. 8/20/91- Convicted of DWI. 10/29/91- Convicted of DWI. 4/8/96-Pled guilty to DWI and misdemeanor possession of a controlled substance. 4/1/97- pled guilty to DWI.	1/3/00 TO 1/3/03
KEVIN A. KLENK ST CHARLES, MO	RN 1999 138 047	Section 335.066.1 and .2 (2) RSMo. 5/9/91- Pled guilty to driving while intoxicated. 5/12/95-Pled guilty to driving while intoxicated. 6/4/98-Pled guilty to resisting arrest. 7/20/99-Pled guilty to driving while intoxicated.	11/19/99 TO 11/19/04

Continued to page 3

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NICU PICU preferred.

Med/Surg



INITIAL PROBATIONARY LICENSE continued

Name	License Number	Violation	Effective Dates
CARLA J. PAULSON SPRINGFIELD, MO	RN 114231	Section 335.066.1 and .2 (1) (2) (5) (12) (14) RSMo. 6/7/94- Pled guilty to forging prescriptions. Admitted to being addicted to prescription drugs from 1990 to 1994.	10/7/99 TO 10/7/01
RITA PAWLY OFALLON, MO	RN 058903	Section 335.066.1 and .2 (8) RSMo. On 3/16/98, Licensee's Georgia license was disciplined for consuming alcohol prior to reporting to work on two occasions.	12/20/99 TO 12/20/02
SHERRI D. SCHANZMEYER MARSHFIELD, MO	PN 1999139704	Section 335.066.1 and .2 (2) RSMo. 3/26/92- Pled guilty to driving while intoxicated. 5/25/95-pled guilty to driving while intoxicated. 1/18/96-Pled guilty to driving on a revoked license. 9/22/97- Pled guilty to driving while intoxicated.	12/2/99 TO 12/2/2002

MISSION OF THE MISSOURI STATE BOARD OF NURSING

The Mission of the Missouri State Board of Nursing is to ensure safe and effective nursing care in the interest of public protection.

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If you would like more information on Saint Joseph's Hospital, please visit our website at:
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University of Arkansas at Monticello

Location: Monticello, Arkansas

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- Reports directly to the Vice Chancellor for Academic Affairs.
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- An earned doctorate in nursing, or a doctorate in a related field with a master's degree in nursing required.
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CENSURED LICENSES

Name	License Number	Violation	Effective Date
TAMARA R. BENNETT HIGGINSVILLE, MO	PN 054359	Section 335.066.2 (5) (12) RSMo. Licensee was working the 6pm to 6am shift at the facility and was assigned to the Medicare wing where she was the charge nurse responsible for the care of high acuity residents. At 11:55pm, Licensee turned off the door alarm that was to sound on the wing to which she was assigned, left the facility and never returned. Licensee did not notify any other employee of the facility that she was leaving. When Licensee left she was the only staff person on duty in the Medicare Wing and left all residents on that wing without care when she left.	12/20/99
ANGELA F. BOURGEOIS COLUMBIA, MO	RN 143551	Section 335.066.2 (5) (12) (14) RSMo. knowingly prescribed and administered Ativan to a patient due to a change in vital signs, which included an increased pulse rate, without a physician's order.	12/31/99
HEATHER L. BUTTS BLUE SPRINGS, MO	PN 056829	Section 335.066.2 (5) (6) (12) RSMo. Practiced nursing on a lapsed license from 11/4/98 to 12/13/98 and from 12/15/98 to 1/27/99.	11/16/99
GAYLE L. CLARK ST PETERS, MO	PN 032642	Section 335.066.2 (5) (12) RSMo. Administered Morphine Sulfate I.V. to a patient on 3 occasions and falsified the patient record by signing the initials of an RN. Administered Versed I.V. to a patient on 2 occasions and falsified the patient record by signing the initials of an RN.	11/6/99
RACHELLE R. COURTRIGHT KINGSTON, OH	PN 054936	Section 335.066.2 (5) (12) RSMo. On 9/6/97, Licensee was the only licensed nurse working the 11pm to 7am shift. At 2:30am, Licensee left the facility to go to her home to unplug an electric potpourri pot.	12/31/99
GAYLA M. ELLIOTT POPLAR BLUFF, MO	RN 103573	Section 335.066.2 (5) (12) RSMo. A patient was brought to the ICU in a heavily sedated state. Members of the nursing team placed a paper flower in the unconscious patient's hand and placed a sign above the patient's head reading "R.I.P." Licensee took a photograph of the unconscious patient and gave it to another member the nursing team.	11/17/99
DARLA A. FREDRICK INGLEWOOD, CO	RN 145957	Section 335.066.2 (8) RSMo. Licensee's Colorado nursing license was disciplined for failing to consult a physician in the administration of a placebo.	1/24/2000
ELLEN M. GRIFFITH PAOLA, KS	PN 048089	Section 335.066.2 (1) (14) RSMo. On 3/10/98, Licensee possessed and consumed Marijuana. On 3/10/98, Licensee submitted to a post-offer pre-employment drug test. The test was positive for Cannabinoids.	11/24/99

Continued to page 5



NURSING OPPORTUNITIES!

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CENSURED LICENSES continued

Name	License Number	Violation	Effective Date
MARY J. HAMBURG FARMINGTON, MO	RN 094125	Section 335.066.2 (6) RSMo. Licensee, who was recognized by the Board as a certified family nurse practitioner, wrote and signed a prescription for Histussin HC cough syrup for a patient	12/1/99
VENEITA K. SMITH MEMPHIS, TN	RN 120487	Section 335.066.2 (5) (12) RSMo. On 2 separate occasions, Licensee took an unauthorized person to visit a home health patient and allowed the unauthorized person to take the patient's vital signs.	12/2/99
CHERYL K. SPENCER MOKANE, MO	PN 053622	Section 335.066.2 (5) (6) (12) RSMo. Practiced nursing on a lapsed license from 6/1/98 to 4/28/99.	1/10/2000
CHERYL K. STOWERS MACON, MO	PN 048473	Section 335.066.2 (5) (12) RSMo. On 9/12/98 and 10/20/98, wrote telephone orders for Medrol for a resident without physician authorization.	1/24/2000
KEMYHATTA N. TATUM KANSAS CITY, MO	PN 054941	Section 335.066.2 (5) (12) RSMo. 4/14/98—Replaced patient nasogastric feeding tube but did not document this. Inadvertently inserted tube into patient's lung. Failed to verify proper placement per hospital policy. Failed to notify oncoming staff of tube replacement.	12/24/99
ANNA L. VIZE CAMDENTON, MO	RN 080924	Section 335.066.2 (6) RSMo. Although not recognized by the Board as an Advanced Practice Nurse, on occasion while employed at Eldon Clinic, Eldon, Missouri, Licensee wore a lab jacket with the words, "Nurse Practitioner" embroidered on it. This could have led patients to believe that she was recognized by the Board as a nurse practitioner.	10/27/99
PATRICIA A. WRIGHT HARRISONVILLE, MO	PN 052777	Section 335.066.2 (5) (6) (12) RSMo. Practiced nursing on a lapsed license from 6/1/98 to 10/28/98.	1/10/00

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PROBATION

Name	License Number	Violation	Effective Date
BARBARA J.	RN 128318	Section 335.066.2 (1) (5) (12) (14) RSMo.	12/2/99 TO 12/2/02
ALLEN OFALLON, MO		Misappropriated Demerol for her own personal consumption.	
BERNITA L. BELL	RN 102112	Section 335.066.2 (6) (7) RSMo. From 9/23/97 to 1/21/98, Licensee practiced and used the title of Family Nurse Practitioner without being recognized as a nurse practitioner.	11/24/99 TO 11/24/04
EFFINGHAM, IL			
MAUREEN E. BENEDICT	PN 044657	Section 335.066.2 (1) (2) (5) (12) (14) RSMo. 2/6/98- Possessed and consumed Marijuana. 3/10/98- Positive drug screen for Marijuana. 6/27/98- Pled guilty to a misdemeanor charge of possession of Marijuana.	12/30/99 TO 12/30/01
ST JOSEPH, MO			
RON L. BERNSKOETTER	RN 098310	Section 335.066.2 (2) RSMo. 8/3/98- Pled guilty to burglary in the 2nd degree on 8/3/98.	11/1/99 TO 11/1/04
JEFFERSON CITY, MO			
CAROLE A. BRIDGMAN	RN 083952	Section 335.066.2 (1) (5) (12) (14) RSMo. Licensee misappropriated Morphine, Fentanyl, and Midazolam for her personal consumption. Licensee consumed Marijuana on an occasional basis.	11/10/99 TO 11/10/02
CLAYTON, MO			
CHRISTINE M. BROWN	RN 132967	Section 335.066.2 (1) (5) (12) (14) RSMo. Licensee misappropriated 250mg of Meperidine.	12/2/99 TO 12/2/02
ST PETERS, MO			
MARTHA S. BUCKNER	RN079351	Section 335.066.2 (2) RSMo. 8/26/98- Found guilty of first degree property damage and second degree attempted property damage.	1/20/00 TO 1/20/02
WRIGHT CITY, MO			
LISA K. CALLEN	RN 090256	Section 335.066.2 (1) (5) (12) (14) RSMo. 10/21/97-Possessed and consumed Codeine, Morphine, and Marijuana. 10/21/97- Positive drug screen for Codeine, Morphine, and Marijuana.	1/3/00 TO 1/3/05
BRENTWOOD, MO			
SHERALDINE N. CAMMON	RN 110670	Section 335.066.2 (2) RSMo. 11/14/97- Pled guilty to unlawful receipt of food stamps over \$150.	8/10/99 TO 8/10/00
ST LOUIS, MO			
ROSE M. DAVIS	RN 139822	Section 335.066.2 (5) (12) RSMo. On 2 separate occasions, Licensee submitted falsified documents to employer regarding postpartum patient visit.	12/14/99 TO 12/14/01
ST PETERS, MO			
CLAUDIA L. DIGGINS	RN 121003	Section 335.066.2 (5) (6) (12) (14) RSMo. Practiced and represented herself as an Advanced Practice Nurse without being recognized by the Board as an Advanced Practice Nurse. Prescribed Codinal DH (a controlled substance).	10/19/99 TO 10/19/00
NOVINGER, MO			


Continued to page 7



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PROBATION continued

Name	License Number	Violation	Effective Date
ERICKAL, DIRE LEE'S SUMMIT, MO	RN 100375	Section 335.066.2 (1) (5) (12) (14) RSMo. Licensee misappropriated Demerol on one occasion.	11/26/99 TO 11/26/02
JAMES M. EGLER FAIRVIEW HEIGHTS, IL	RN 065240	Violated agreement with Missouri State Board of Nursing by not completing the required number of contact hours.	12/21/99 TO 12/21/00
PAULA M. EYE POTOSI, MO	PN050052	Section 335.066.2 (2) RSMo. 10/5/98- Pled guilty to Class C Felony of possession of a controlled substance.	12/31/99 TO 12/31/04
THERESA D. GALAKATOS BRENTWOOD, MO	RN 134921	Section 335.066.2 (5) (12) RSMo. Documentation Errors.	1/12/00 TO 1/12/02
MARILYN L. GWIN CATAWISSA, MO	PN 051002	Section 335.066.2 (5) (12) RSMo. Licensee failed to properly assess a patient who was complaining of chest pains and prescribed additional medication based on the patient report from an unlicensed individual. Licensee also failed to report the patient's condition to the staff on the next shift.	11/18/99 TO 11/18/01
LISA HACKETT MOBERLY, MO	RN 138441	Section 335.066.2 (5) (12) RSMo. Did not document the administration of Tylenol #3 on five occasions. Withdrew Tylenol #3 for a patient she was not assigned to. Did not document that Tylenol #3 was given to the patient or that the patient was in any discomfort.	8/20/99 TO 8/20/02
CLIFFORD A. KEITH ST LOUIS, MO	RN 090102	Section 335.066.2 (8) RSMo. Licensee's Arizona nursing license was revoked due to failing a performance based developmental skills assessment test, failing to pass a urine drug screen on 2 occasions and because of questionable specimen integrity, and admitting to smoking Marijuana.	12/3/99 TO 12/3/02
SUZANNE C. KENTCH TOPEKA, KS	RN 133465	Section 335.066.2 (5) (6) (12) RSMo. Licensee practiced nursing on a lapsed license from 5/1/97 to 7/3/98.	11/1/99 TO 11/1/00
JUDITH G. KETNER SARCOXIE, MO	PN 038030	Section 335.066.2 (5) (12) RSMo. On 5 occasions, Licensee failed to accurately document administration of Ativan in a patient's medical records.	11/23/99 TO 11/23/02
GERALD L. KUECKELHAN COLUMBIA, MO	RN 076407	Section 335.066.2 (1) (5) (12) (14) RSMo. Misappropriated Fentanyl from June 1996 to December 1997 for personal consumption.	10/19/99 TO 10/19/04
SHERYL A. MAX KANSAS CITY, MO	RN 082429	Section 335.066.2 (5) (6) (12) RSMo. Licensee practiced nursing on a lapsed license from 5/1/96 to 11/16/98.	11/1/99 TO 11/1/00

CHANGE OF ADDRESS FORM

Please complete the following information and return this form to our office.

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Name	License Number	Violation	Effective Date
LEVENIA A. METTLER ROLLA, MO	RN 071691	Section 335.066.2 (5) (12) RSMo. Failed to accurately chart a patient's condition and failed to timely intervene on a patient's behalf. Failed to timely intervene in a patient's complaint of severe chest pain. Removed a patient's porta cath intravenous access before an order was received from the physician. Failed to attend to an IV pump alarm. Failed to properly operate a PCA pump.	10/26/99 TO 10/26/04
GREG F. MEYER BARNHART, MO	RN 142237	Section 335.066.2 (5) (12) RSMo. Licensee incorrectly programmed a patient's PCA pump to administer Morphine resulting in the patient receiving an excessive amount of Morphine.	12/2/99 TO 12/2/00
JAYNE NICHOLSON MOORE SIKESTON, MO	RN 123899	Section 335.066.2 (1) (5) (12) (14) RSMo. Beginning in 1996 through March 26, 1998, Licensee misappropriated Valium and Demerol for her personal consumption.	10/27/99 TO 10/27/02
REBECCA A. PETTI ALTON, MO	PN 036841	Section 335.066.2 (1) (2) (5) (12) (14) RSMo. 9/22/97- Licensee consumed Marijuana. 9/22/97- Licensee tested positive for Marijuana. 8/27/99- Licensee entered an alford plea of guilty to unlawful possession of a controlled substance.	12/1/99 TO 12/1/03
DELORES J. PODHORN SPRINGFIELD, MO	RN 095165	Section 335.066.2 (5) (12) RSMo. Forged a doctors signature to 13 physical examination reports after they were transcribed	Probation will be effective on the date that licensee reactivates license and will be effective for 2 years
JEFFREY L. RICHARDSON LEXINGTON, MO	RN 106582	Section 335.066.2 (1) (5) (12) (14) RSMo. Misappropriated Versed on an ongoing basis for personal consumption. 11/12/98- positive drug test for Benzodiazepines.	1/20/00 TO 1/20/005
CATHY J. ROUSH HARRISONVILLE, MO	PN 022289	Section 335.066.2 (5) (12) RSMo. Licensee falsified medical documents by placing her name on another patient's colonoscopy and pathology tests and then presented the falsified x-ray, which showed cancer, to her physician. Licensee's physician referred her to a surgeon who performed surgery on Licensee based on the information in the falsified report.	12/24/99 TO 12/24/00

Continued to page 9

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PROBATION continued

Name	License Number	Violation	Effective Date
DEBRA S. SANDERS COLUMBIA, MO	RN 116889	Section 335.066.2 (1) (2) (5) (12) (14) RSMo. Misappropriated Demerol on more than one occasion for personal consumption. Abused Demerol, Morphine, Cocaine, Marijuana, and alcohol. 5/31/95-Tested positive for Morphine. 11/3/97- Pled guilty to unlawful possession of a controlled substance.	11/2/99 TO 11/2/04
TARISSA L. STANCIEL KANSAS CITY, MO	RN 144304	Section 335.066.2 (5) (6) (12) RSMo. Licensee practiced nursing on a lapsed license from 5/1/97 to 3/24/99.	10/26/99 TO 10/26/00
MARSHA D. TYES ST JOSEPH, MO	PN 048651	Section 335.066.2 (5) (12) RSMo. 5/17/95-Falsely documented administration and wastage of narcotics for a patient. 5/26/95- Falsely documented the administration of narcotics to a patient. 5/8/96- Failed to properly dispense medication to 4 patients. 7/1/96- Made medication error when she administered a patient's insulin at the wrong time. 11/26/97- Failed to dispense a prescribed medication and falsely documented that she had administered the medication. 8/14/98- hung an IV Piggy Back medication on the wrong patient.	12/3/99 TO 12/3/01
MELINDA S. WYRICK RAYMORE, MO	RN 122147	Section 335.066.2 (1) (5) (12) RSMo. 1/20/98-Licensee possessed and consumed Morphine, Amphetamine and Methamphetamine prior to reporting for duty. Licensee reported to work under the influence of drugs.	12/02/99 TO 12/02/03

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For consideration for St. Joseph Health Center, please send resume or apply in person Monday - Friday 7:30 a.m. - 4 p.m., at St. Joseph Health Center, Human Resources Department, 300 First Capital Drive, St. Charles, Missouri 63301

For consideration for St. Joseph Hospital West Lake St. Louis, please send resume or apply in person Monday - Friday 8 a.m. - 3:30 p.m., at St. Joseph Hospital West - Lake St. Louis, Human Resources Department, 100 Medical Plaza, Lake St. Louis, Missouri 63367



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SUSPENSION/PROBATION

Name	License Number	Violation	Effective Dates of Suspension	Effective Dates of Probation
ELIZABETH M. HELD ST. CHARLES, MO	RN 104856	Section 335.066.2 (1) (5) (12) (14) RSMo. On 5 separate occasions, licensee misappropriated Fentanyl for her personal consumption.	11/26/99 TO 11/26/00	11/26/00 TO 11/26/05

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REVOKED LICENSES

Name	License Number	Violation	Effective Date
KIM A. ALEXANDER Afton, MO	RN 135254	Violated Missouri State Board of Nursing agreement by not attending required meetings and not submitting required documentation.	12/21/99
MARY SUSAN FULLER KANSAS CITY, KS	PN 049595	Violated Missouri State Board of Nursing agreement by not attending scheduled meetings and not submitting documentation as required.	12/21/99
ROBERTA L. HANSEN BOONVILLE, MO	RN 121892	Section 335.066.2 (1) (2) (5) (12) (14) RSMo. 3/25/95- Misappropriated Demerol from the Cath Lab at the facility. 11/13/95- Pled guilty to larceny/stealing.	10/26/99
VERONICA A. KASSEBAUM O'FALLON, MO	RN 113453	Violated existing agreement with Missouri State Board of Nursing by not attending required meetings and not submitting required documentation.	12/21/99
JANICE J. KING FLORISSANT, MO	RN 117045	Violated Missouri State Board of Nursing agreement by not attending required meetings and not submitting required documentation	12/6/99
KEN L PALMER SPRINGFIELD, MO	RN 132029	Section 335.066.2 (2) RSMo. 4/3/98- Pled guilty to two counts of Class A misdemeanor sexual misconduct for purposely subjecting two female patients to contact through their clothing without their consent. This occurred during the course of the Licensee's dental practice in 1997.	10/26/99
CLARENCE E. WALKER ST LOUIS, MO	RN 070480	Violated agreement with the Missouri State Board of Nursing by not attending required meetings and not submitting required documentation.	12/21/99

**Please be advised that more than one licensee may have the same name. Therefore, in order to verify a licensee's identity, please check the license number and/or contact the Board office at (573) 751-0082.

VOLUNTARILY SURRENDERED LICENSES

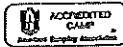
Name	License Number	Effective Date
JOHN G. CHRISTIAN ST CHARLES MO	RN 153403	11/2/99
RUTH A. COX CHESTER IL	RN 147989	11/5/99
CAROL A. GANO BALLWIN MO	RN 127332	12/20/99
JEAN A. POLZIN BILLINGS MO	RN 136734	12/30/99

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Investigations Corner

George Snodgrass
Chief Investigator

The Office of Investigations is the first line of response to all complaints received by the staff of the Missouri State Board of Nursing. As such, I thought it would be helpful to briefly describe the role of Board investigators and the structure of the Office of Investigations.

When a complaint is received in the Board office, it is reviewed by the Chief Investigator who classifies the complaint according to the alleged conduct, sorts it geographically and then assigns it to the investigator who works in the area where the complaint originated occurred. Each investigator then functions as an arm of inquiry for the Board in order to gather all of the necessary information so that the Board members can evaluate and determine if cause for discipline exists.

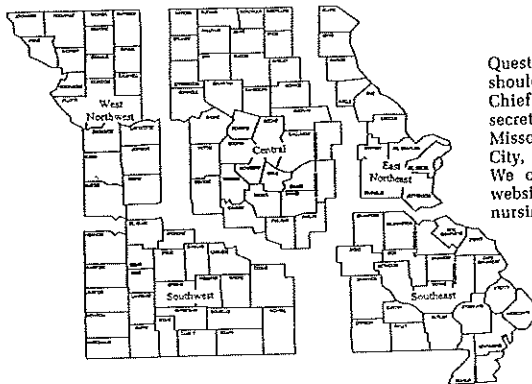
In order to conduct a thorough investigation, the investigators interview the complainant, the licensee named in the complaint and any other known witnesses who may have relevant information to provide. In addition, the investigators gather pertinent documents, such as patient records, medication administration records or court records, to assist the Board members in their evaluation of the complaint. Once the investigation is complete, all of the information is formulated into a final report for the Board's review. The investigators do not participate in the Board's decision-making process or know what type of disciplinary action that the Board may take. The investigators merely gather the information so that the Board members can make a fully informed decision.

The Office of Investigations is organized in the following manner.

The Board employs the services of both staff and contract investigators. The staff investigators consist of one (1) Chief Investigator and two (2) field investigators. Contract investigators currently consist of eleven (11) field investigators. In addition, contract investigative duties are divided into five operational areas throughout the state. The following is a break down of the investigators by their area of assignment:



George Snodgrass



STAFF INVESTIGATORS

Chief
George Snodgrass

West
Linda Becker

East
Robert Ehrhard

CONTRACT INVESTIGATORS

West/Northwest
Gary Worden
Duane Leiter

Central
Calvin Culp
Randall Oitker

East/Northeast
Wayne Brocato
Walt Miller

Southwest
Lester Tuell
Robert Cirtin
Mike Downs

Southeast
Jon Knehaus

Questions for the Office of Investigations should be directed to George Snodgrass, Chief Investigator, or Jennifer Houston, secretary for the Chief Investigator, at 3605 Missouri Boulevard, P.O. Box 656, Jefferson City, Missouri 65102 or call 573-751-0070. We can also be reached at the Board's website: <http://www.ecodev.state.mo.us/pr/nursing/>

SERVE THOSE WHO HAVE SERVED

The Missouri Veterans' Home in Mexico, MO, is searching for dedicated people to serve those who have served our country. We are currently accepting applications for full-time LPNs and RNs for evening shift and part-time nursing position for all shifts, this includes RNs, LPNs and CNAs/NAs. Certification is preferred for nursing assistants, but we will pay for training if necessary.

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RN \$17.87/Hour

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Most of the content in this section is developed by Rita Tadych, PhD, RN, Assistant Director for Discipline and Practice. Please be advised that her content is not intended to represent the legal opinions or views of the Board. Content included in this section that was developed by the Missouri State Board of Nursing is identified as that of the Board.

MISSOURI STATE BOARD OF NURSING PRACTICE COMMITTEE MEMBERSHIP

Robin Vogt, MSN, RN, FNP-C, Chairperson
Arthur Bante, RN, CRNA
Jan Davis, LPN
Cordella Esry, PhD, RN
Paul Lineberry, PhD
Patricia Versluis, RN

FREQUENTLY ASKED QUESTIONS



ADVANCED PRACTICE NURSES

Q: I have recognition as an advanced practice nurse from the Missouri State Board of Nursing based on being certified by a certifying body acceptable to the Board. On my certifying body's recertification application form, I checked a box authorizing the certifying body to provide the Board of Nursing with recertification verification once my recertification evidence was reviewed by my certifying body and I was designated as recertified by them. How is it, then, that I was not issued a new "Document of Recognition" reflective of being recertified and my Board recognition

expired, thereby placing my continued use of advanced practice nurse title and practice in violation of law?

A: There is a necessary distinction to keep in mind. Certifying bodies are national organizations, not regulatory bodies. Certifying bodies have no obligation to ensure that evidence required by a particular state's law finds its way to a specific licensing body by a date designated by that state's laws. It is not a certifying body's responsibility to keep its customers in compliance with state laws regarding the authorized titling, representation, designation, and practice as advanced practice nurses. Accountability and responsibility rests with each individual licensee to ensure his/her compliance with the state laws regulating his/her scope of practice.

Pursuant to 4 CSR 200-4.100(8)(C) and (E), licensees must have a copy of their recertification evidence in the Board of Nursing office on or prior to the expiration date that appears on their Board issued "Document of Recognition" (which is the same date that certification from the certifying body expires). Recertification evidence can be either a copy of one's recertification card or, if the card is not yet in the licensee's hands, a letter from the certifying body verifying one's specific area of



Rita Tadych, PhD, RN

recertification and specifying the new recertification period.

Although a certifying body may allow its customers to submit the recertification application and documentation to its office after the certification expiration date, and will then back date renewal, 4 CSR 200-4.100 does not include a grace period. Licensees should take all reasonable and prudent steps to make certain that a copy of their recertification evidence is actually in the Board office on or before the "Document of Recognition" expiration date to ensure their advanced practice nurse recognition from the Missouri State Board of Nursing does not expire.

Q: I am a masters prepared nursing faculty member who teaches graduate and undergraduate nursing in Missouri but am not involved in my own clinical practice. I refer to myself as an advanced practice nurse (nurse anesthetist, nurse midwife, nurse practitioner, clinical nurse specialist) and may use an advanced practice nurse title but do not have current recognition from the Board. Since I am an educator and not involved in my own clinical practice and am not in a collaborative practice arrangement, why am I in violation of the law?

A: Pursuant to 4 CSR 200-4.100(4)(A), only those registered professional nurses duly recognized by the Missouri State Board of Nursing have the right to title, represent, designate themselves or practice as advanced practice nurses (nurse anesthetist, nurse midwife, nurse practitioner, clinical nurse specialist).

Q: I have graduated from an advanced nursing education program but have not yet been recognized by the Missouri State Board of Nursing. I have been hired by a facility to fill an advanced practice nurse position. Can I begin orientation before I have been recognized?

A: Pursuant to 4 CSR 200-4.100(4)(A), only those registered professional nurses duly recognized by the Missouri State Board of Nursing

Continued to page 13

Medical

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PRACTICE CORNER

(Continued from page 12)

have the right to title, represent, designate themselves or practice as advanced practice nurses (nurse anesthetist, nurse midwife, nurse practitioner, clinical nurse specialist).

Q: I want to stay within the requirements of the law but 4 CSR 200-4.200(3)(1)9 of the Collaborative Practice Rule continues to present difficulties for me in my clinical setting. For example, if there are typically used controlled substance prescriptions in my practice, could my collaborating physician generate a generic written standing order or protocol for each drug, which I could then use for particular patients to simply call in their controlled substance prescriptions to the pharmacist under my collaborating physician's name?

A: 4 CSR 200-4.200 specifies that advanced practice nurses cannot, under any circumstances, prescribe controlled substances. The language also specifies that a physician's prescription for a controlled substance must be obtained "on a case-by-case determination . . . following verbal consultation between the collaborating physician and collaborating . . . advanced practice nurse."

Q: Can my collaborating physician provide me with presigned, blank prescriptions so that I can fill in a specific physician order for a controlled substance at a later time when I need such prescription?

A: Section 334.100.2(4)(h), RSMo, permits the Board of Healing Arts to cause a complaint to be filed against a physician's license for "signing a blank prescription form." In addition, federal regulation 21 CFR 1306.05 states in part: "All prescriptions for controlled substances shall be dated as of, and signed on, the day when issued and shall bear the full name and address of the patient, the drug name, strength, dosage form, quantity prescribed, directions for use and the name, address, and registration number of the practitioner." For further guidance, review section 195.080, RSMo, which discusses controlled substance prescriptions.

Q: I understand there are federal laws regarding controlled substances listed in Schedule II, III, IV, and V that discuss the requirement of prescription in some detail. Please provide more information on this matter.

A: I believe Bert McClary, R.Ph., Assistant Administrator, Bureau of Narcotics & Dangerous Drugs, 573-751-6321, would be your best resource for discussing or obtaining a copy of the federal regulation pertaining to this matter. You may also retrieve these regulations via Internet at <http://www.access.gpo.gov/nara/cfr/>. The DEA regulation is in Title 21 CFR, Part 1306, Sections 11, 12, 13, 14 and 21, 22, 23, 24, 25, and 26.

REGISTERED PROFESSIONAL NURSES AND LICENSED PRACTICAL NURSES

Q: I read in the Board's November, December 1999, January 2000 Newsletter, Practice Corner, that a physician's order is required for a licensed nurse to administer such things as tuberculin skin tests, influenza injections, and hepatitis injections. I need clarification as to whether this need for a physician's order applies to a licensed nurse administering any of these to fellow employees in a facility?

A: Pursuant to section 335.016 (9) and (10)(c), RSMo, licensed nurses may administer prescription-required medications and treatments as prescribed by a person licensed by a state regulatory board to prescribe medications and treatments.

Q: I recall having been taught about the "five rights of medication administration" in nursing school but cannot find a source to remind me of what each of them are. Please assist.

A: The Nurse's Legal Handbook (Springhouse, 1996) reminds readers of the long-standing standard, the "five rights of medication administration":

- the right drug
- to the right patient
- at the right time
- in the right dosage
- by the right route.

It is further asserted by this reference that it is prudent to add a sixth "right" to the checklist:

- by the right technique.

Noncompliance with being able to confirm each of the five or six rights increases the potential for harm to a client, increases the liability risk to the licensed nurse and his/her employer, and may result in disciplinary action against the nurse's license pursuant to section 335.066, RSMo.

Q: I am a physician interested in any information concerning any past, present, or pending disciplinary actions that have been, are, or are being considered/applied against the named nurse. Please provide me with this information.

A: Pursuant to section 620.010.14 (7), RSMo, the only information concerning a licensee/applicant that is public includes: name(s), address, license type, license number, date license was issued and expires, license status and any final disciplinary action that was taken by the Board. All other information is confidential and may only be released with the written authorization of the

licensee/applicant, pursuant to a court order or in accordance with a request from another administrative or law enforcement agency.

Q: I understand that, in December 1999, the Board addressed a matter that had originally been discussed in "Frequently Asked Questions" in the May, June, July 1999 Missouri State Board of Nursing Newsletter. It concerned the scope of practice of IV certified LPNs regarding removal of intravenous lines. What was the Board's decision?

A: The decision of the Board was that, pursuant to 4 CSR 200-6.010 Intravenous Fluid Treatment Administration, and an authorized prescriber order, IV certified licensed practical nurses may stop and remove (i.e., discontinue) peripheral venous lines, excluding PICC lines.

Q: I am a licensed practical nurse who would, on my own, like to provide in-home nursing care services during the day for individuals in my community since I have a family. I was thinking of putting an ad about offering this service in the local newspaper. Can I do this?

A: Pursuant to section 335.016 (9), RSMo, licensed practical nurses can only perform nursing acts as an agent of a "person licensed by a state regulatory board to prescribe medications and treatments or under the direction of a registered professional nurse." Licensed practical nurses are not legally authorized to perform nursing acts independently.

*The Nursing Practice Act can be found in Chapter 335 of the Missouri Revised Statute, 1994 and 1999 Supplement. Regulations pertaining to the nursing profession are located in Chapter 4 Section 200 of the Missouri Code of State Regulations. Access at <http://www.ecodev.state.mo.us/pr/nursing>.

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Seeking RN's & LPN's to work in a rural hospital setting located in SW Missouri. Please contact Sue Hughes, RN DON (417) 876-2511 ext. 3238
1401 S. Park, El Dorado Springs, MO 64744
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Complete the National Council's puzzle!

The National Council is looking for nurses to serve on an NCLEX® examination item development panel. The National Council needs individuals who work directly with the following:

- Staff nurses
- Charge nurses
- Clinical nurse specialists
- Clinical nurse managers
- Preceptors
- Faculty

NCLEX examination item writers write items (questions) that are used for the NCLEX examination with the assistance of the National Council's test service. Item reviewers check items for currency, accuracy, job relatedness and appropriateness for the entry-level nurse.


Benefits include:

- more than 30 contact hours
- networking opportunities with colleagues from across the country
- excellent addition to your resume
- all expenses paid

To access the item development panel application online:

1. Go to the National Council's Web site at <http://www.ncsn.org>
2. Choose "NCLEX® Examination" from the scroll-down menu on the National Council's home page
3. Click the Section Contents link labeled "Developing the NCLEX® Examination"
4. Click the link labeled "Item Development Application"

If you do not have access to the Web or if you have any questions, please call the National Council's Item Development Hotline at 312/787-6555, Ext. 496, and leave a message with your name, address and phone number.



Regional Quality Improvement Coordinator

Must have a RN degree and two years of quality and process improvement. Experience, or demonstrated expertise in the development, application, implementation, and monitoring of quality assurance indicators. Candidate must be a person of energy and vitality with strong work ethic, and willing to travel. The ideal candidate should be able to mentor, educate and arrange in-service in the field, engage in constructive criticism, facilitate positive learning experiences for clinicians, and participate in writing corrective action plans when necessary. Send or fax resume to



KANSAS REGIONAL OFFICE
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Fax 707/464-8941
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RN Opportunities

ARE YOU LOOKING FOR A NEW, EXCITING, AND REWARDING CAREER? If the answer is yes, come check us out!

St. Anthony's Medical Center, one of the region's leading medical centers, has a history of excellence and offers a fantastic future. Our growth has created a need for talented professionals to work a variety of Full-time, Part-time, and Per Diem (as needed) positions in the following areas:

Critical Care RN's: SICU, PCU, CCU, CVICU, IMCU, CV Stepdown, OR, and CVOR (Critical Care Nursing Experience is required for these positions.)
RN's: Medical, Surgical, Telemetry, GU/GYN, Orthopedics, Oncology, Rehab, and the Float Pool (Previous RN experience is desired for these positions.)

We are currently offering a \$5 SIGN-ON BONUS \$5 for RNs who are hired into any of our full-time or part-time (32 hrs. or more per pay period) positions. To find out more about this \$5 BONUS \$5, please call (314) 525-1978.

St. Anthony's Medical Center has a convenient suburban location in St. Louis, Missouri. We offer a salary commensurate with experience and provide an excellent benefit package for our full-time and part-time employees. Interested applicants please submit an application or resume to:



St. Anthony's Medical Center

HUMAN RESOURCES DEPARTMENT
10010 KENNERLY ROAD, ST. LOUIS, MO 63128

(314) 525-1010
Fax: (314) 525-4040
EOE M/F/H/V



Licensure Corner



Lori Scheidt

Lori Scheidt, AA, Licensing Supervisor

Missouri State Board of Nursing Licensure Committee Members:

Ian Davis, LPN, Chair
Arthur Bante, RN, BSA, CRNA
Paul Lineberry, PhD
Patricia Versluis, RN
Charlotte York, LPN

LPN Renewal Information — Licenses Expire May 31, 2000

LPN licenses expire on May 31 of each even-numbered year. That means current LPN licenses will expire on May 31, 2000. During the first two weeks of March, a renewal notice will be mailed to each currently licensed LPN to the address in our database. If you have a new name or address, please notify us NOW by following the directions contained in this newsletter. If you do not receive a renewal notice by April 1, 2000, please contact our office so we may provide you with directions on how to renew your license.

Have you notified the Board of Your Name and/or Address Change?

4 CSR 200-4.020 (15)(b) (1) says in part "If a change of name has occurred since the issuance of the current license, the licensee must notify the board of the name change in writing" and (2) If a change of address has occurred since the issuance of the current license, the licensee must notify the board of the address change."

Please feel free to use the form below to notify the board office of your name and/or address change.

NAME AND ADDRESS CHANGE NOTIFICATION FORM	
1. Is this an address change?	<input type="checkbox"/> YES <input type="checkbox"/> NO
2. Is this a name change?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Missouri License Number:	<input type="checkbox"/> RN <input type="checkbox"/> LPN
OLD INFORMATION (please print):	
First Name	_____
Last Name	_____
Address	_____
City	_____
State	Zip Code _____
NEW INFORMATION (please print):	
First Name	_____
Last Name	_____
Address	_____
(If your address is a PO Box, you must also provide a street address):	
City	_____
State	Zip Code _____
Please provide signature: _____	

Duplicate license instructions

It is not mandatory that you obtain a duplicate license due to a name or address change. You may practice nursing in Missouri as long as your Missouri nursing license is current and valid. You may, however, request a duplicate license reflecting your new name, by returning the form above with ALL current evidence of licensure (the wallet size card and/or wall hanging document) and the required fee of \$5.00. Mail all these documents to the: Missouri State Board of Nursing, P O Box 656, Jefferson City, MO 65102.

Lost or Stolen License?

If you would like to obtain a duplicate license because your license has been lost or stolen, please contact our office and request an Affidavit for Duplicate License form.

You may contact our office in one of the following manners:

Internet E-mail: nursing@mail.state.mo.us
(address changes only)
Fax: 573-751-6745 or 573-751-0075
Mail: Missouri State Board of Nursing,
P O Box 656, Jefferson City MO 65102
Telephone: 573-751-0681
(address changes only)

Forms on Board's WebSite

If you need to renew a license that is NOT CURRENT, you may find the forms to renew on the Board's website at <http://www.ecodev.state.mo.us/pr/nursing>. Click on the Licensure Info/Forms tab. The Board plans to have applications for licensure by exam and endorsement on this site in the very near future.

Continued to page 16

RN'S/LPN'S
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Careers@IHS.ORG
www.IHSDSMOINES.ORG

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Acute Care Med/Surg RN's

LPN's - \$750 to \$1,500 sign on bonus. Experience preferred but new graduates will be considered

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Interested candidates should contact
Carol Malloy, (573) 814-6403 or
Janet Scheidt, (573) 814-6404,
Human Resources, to obtain application packet.

Harry S. Truman Memorial Veterans' Hospital
800 Hospital Drive
Columbia, MO 65201

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CHAIR, DEPARTMENT OF NURSING
<http://falconsbuniv.edu/about/jobs.htm>

Southwest Baptist University and St. John's School of Nursing of SBU are seeking qualified applicants for the university's nursing program located in Springfield, Missouri.

REQUIRED DEGREE QUALIFICATIONS INCLUDE:

- Earned doctorate in nursing or a related field
- Master's degree in nursing

RESPONSIBILITIES INCLUDE:

- Planning, coordinating, and directing NLN accredited AASN, AASN to BSN, and BSN Completion Program

For detailed criteria and application guidelines visit the above website or mail/fax requests to:
Virginia Mayeux, Director of Nursing
Southwest Baptist University-Springfield
4431 S. Fremont
Springfield, MO 65804
Fax: (417) 887-4847
E-mail: VMAYEUX@sprgsmhs.com

LICENSURE CORNER

(Continued from page 15)

Commonly Asked Licensure Questions

- Where do I call to verify a Certified Nurse Assistant (CNA) or Certified Medical Technician (CMT)?
- Contact the Division of Aging at (573) 526-5686.
- Where do I call to verify an Emergency Medical Technician (EMT)?
- Contact the Bureau of Emergency Medical Services at (573) 751-6356.
- What is the process for the Board to endorse my license to another state?

You must contact the state board of nursing where you want a license and request an application for licensure. Contact information for boards of nursing can be found at www.nursingboards.org. At the time you apply for licensure in another state, that Board will give you a verification of licensure form that must be sent to our office for completion. Fill out your part of the form and send it to our office with a \$5.00 check or money order. Please be sure to include your Missouri license on the form and check or money order. We will complete the remainder of the form and forward it to the state in which you are applying for a license.

VERIFICATION OF LICENSE

Ask to see an original current Missouri license or temporary permit before the employee reports to orientation. A temporary work permit will have a raised Board seal. A license will have the expiration date, profession and license number. The license number could be the profession code (RN or PN) followed by a 6-digit number or a 10-digit number, which consists of the year of license followed by a 6-digit number. Example: 2000134176.

The name, address and licensure status of all currently licensed nurses is public information. If you have any questions, please call the Board office to verify credentials before hiring. Our office is staffed Monday through Friday from 8:00 AM to

5:00 PM, excluding state holidays. You may also reach our office by:

Fax at (573) 751-6745 or (573) 751-0075
Phone at (573) 751-0681
e-mail at nursing@mail.state.mo.us

Graduate Nurse Practice The Rule

State Regulation 4 CSR 200-4.020 (3) reads: "A graduate of a nursing program may practice as a graduate nurse until s/he has received the results of the first licensure examination taken by the nurse or until ninety (90) days after graduation, whichever first occurs."

Missouri does not issue a graduate temporary permit, however, if the individual qualifies s/he may practice as a graduate nurse under 4 CSR 200-4.020 (3).

The graduate must cease practice as soon as s/he fails the exam or 90 days after graduation, whichever is first.

We recommend that you have the graduate sign an Authorization to Release Confidential Information form so we may provide you with periodic updates on the person's exam and licensure information. A sample authorization form is included with this article.

After the Examination

Graduates applying for an original license by exam in Missouri will be licensed automatically upon receipt of passing results provided all other licensure requirements are met. When results are received, the successful candidate will be sent the results and a "pass" letter authorizing the person to practice until the license is received.

There is a thirty (30)-day grace period for graduates who have successfully passed the first available licensing examination in another state following graduation to obtain a temporary permit or license in Missouri after the graduate has received his/her results. Graduates applying for endorsement to Missouri should begin the Missouri licensure process immediately following graduation. As soon as the graduate receives passing results, the graduate should forward a copy of the results to our office so we can issue a temporary permit. A temporary permit cannot be issued until another state has issued the applicant the authority to practice in that state.

About Orientation

Orientation is considered to be employment. Any nurse in orientation must have either a valid Missouri temporary permit or current Missouri license. The only exception to this policy is if the nurse is practicing under an exemption as listed in Chapter 335.081 of the Missouri Nursing Practice Act or under State Regulation 4 CSR 200-4.020 (3).

Proper Supervision

According to 4 CSR 200-5.010 (1), proper supervision is defined as, "the general overseeing and the authorizing to direct in any given situation. This includes orientation, initial and ongoing direction, procedural guidance and periodic inspection and evaluation."

AUTHORIZATION TO RELEASE CONFIDENTIAL INFORMATION

(Print Legibly in Black Ink)

I, _____, hereby authorize the MISSOURI STATE BOARD OF NURSING to release any and all information regarding my licensure and exam application status as a Licensed Practical Nurse/Registered Professional Nurse to my employer,

and/or their representatives.

This release authorizes the Missouri State Board of Nursing to release the following information: my name, address, nursing school name, graduation date, eligibility status, test appointment date, date exam was taken, whether or not I took the exam and my exam results.

A copy of this authorization will be considered as effective and valid as the original.

Date _____

Applicant's Signature _____

Applicant's Printed Name _____

Applicant's Social Security Number _____

Fax to the Missouri State Board of Nursing at (573) 751-6745.

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| - E.R. | - Behavioral Health |
| - Pediatrics | - Hemodialysis |
| - O.R. | |

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Jefferson Memorial Hospital is a 250 bed facility conveniently located on I-55, exit 174A. We would welcome the opportunity to share our 42 years of rich heritage along with our winning spirit and cultures with those individuals looking for a fulfilling career with a growing community based hospital.

If you are a highly motivated, well organized and dedicated patient care provider, you have a special invitation to explore the following full-time, part-time, and PRN Registered and Licensed Practical Nurse positions in the following departments:

Telemetry	OB
Surgical	Behavioral Health
E.R.	Crystal Oaks Long Term Care Facility

Jefferson Memorial Hospital offers its team members the following:

- Competitive Salaries
- Tuition Reimbursement
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- Wellness Center

Candidates are invited to visit our Human Resources Department Mon. - Fri., 7:30 a.m. - 4:00 p.m. or send a resume with salary history to:

Jefferson Memorial Hospital
P.O. Box 350, Crystal City, MO 63019
FAX: (636) 933-1426
or E-mail: kponagrac@jeffersonmemorial.org
Visit our Website at www.jeffersonmemorial.org EOE M/F/D/V

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- * Orthopaedic
- * Ortho Rehabilitation
- * Outpatient Surgery
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- * Skilled Nursing
- * Surgical Services

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We offer highly competitive salaries, accelerated rates of pay for weekend positions, a pleasant and professional working environment, and advancement opportunities. An excellent benefit package is also included for full-time positions.



Nestled in the middle of the state of Missouri, Columbia is home to the University of Missouri, and ranked nationally as one of the most desirable places to live. This unique city combines the quality and culture of larger metropolitan areas with the warm hospitality of the Midwest. If interested, apply to: Columbia Regional Hospital, 404 Keene Street, Columbia, MO 65201.

AA/EEOI For ADA Accommodations call 573-875-9240

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- Neuroscience
- Skilled Nursing
- Behavioral Health
- Burn Center
- NICU
- Labor & Delivery
- Orthopedics
- Rehabilitation
- OR

If you are exploring challenging, clinical opportunities, and want to work in a Catholic organization, we want to meet you! St. John's Mercy is a progressive teaching facility that offers an excellent salary commensurate with experience, and benefits which include a tuition reimbursement program. Qualified candidates may fax resume with cover letter to 314-995-4222, or apply in person in the Human Resources office at the Medical Center between the hours of 8:00 a.m. - 5:00 p.m., Monday through Friday.

St. John's Mercy Medical Center
615 South New Ballas Rd.
St. Louis, MO 63141
Email: biggdd@stlo.smhs.com



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SOUTHPOINTE HOSPITAL

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Summary of Actions from December 1999 Board Meeting

ADMINISTRATIVE MATTERS

- An Ad Hoc committee was formed in order to develop methods to educate the public, members of the nursing profession and legislators in regard to multi-state regulation.

EDUCATION MATTERS

The Board met with the schools listed below to discuss the following matters:

- Barnes College of Nursing – Response to NCLEX-RN pass rate of below 80% for three consecutive years. The decision of the Board was to accept the report from Barnes College of Nursing.
- St. Louis College of Health Careers – Review of material requesting to re-establish St. Louis College of Health Careers Practical Nursing Program/Butler Hill Campus. The decision of the Board was to accept the proposal for the LPN program for the South County campus for the St. Louis College of Health Careers.
- Texas County Technical Institute – Review of requested material to complete proposal process of a practical nursing program. The decision of the Board was to accept the proposal of Texas County Technical Institute.
- North Central Missouri College – Response on letter of warning regarding pass rate below 80% for two consecutive years. The decision of the Board was to accept the report from North Central Missouri College.

- Penn Valley Community College – Response to warning related to NCLEX-RN pass rate of below 80% for three consecutive years. The decision of the Board was to accept the report from Penn Valley Associate Degree program.
- Southeast Missouri State University – Response to pass rate below 80% for two consecutive years. The decision of the Board was to accept the report from Southeast Missouri State University regarding students scores on NCLEX.

PRACTICE MATTERS

The Board considered the recommendation from the Practice Committee regarding the request by the Missouri State Medical Association and the Missouri Society of Anesthesiologists to retract or correct the Position Statement, "Board of Nursing-Recognized Nurse Anesthetist Scope of Practice". The decision of the Board was to rescind the March 3, 1999 Missouri State Board of Nursing Position Statement – Board of Nursing Recognized Registered Nurse Anesthetist Scope of Practice. This rescinds all State Board of Nursing position statements regarding CRNAs practice.

DISCIPLINE MATTERS

The Board held seven violation and two disciplinary hearings.

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MISSOURI CODE OF STATE REGULATIONS MISSOURI STATE BOARD OF NURSING

CHAPTER 4 – GENERAL RULES

4 CSR 200-4.010 Fees

PURPOSE: This rule establishes and fixes the various fees and charges authorized by Chapter 335, RSMo.

- (1) The following fees are established by the State Board of Nursing:
 - (A) Examination Fee—Registered Professional Nurse (RN) \$ 20.00;
1. Reexamination Fee—RN \$ 15.00;
 - (B) Examination Fee—Licensed Practical Nurse (LPN) \$ 11.00;
1. Reexamination Fee—LPN \$ 10.00;
 - (C) Endorsement Fee—RN \$ 30.00;
 - (D) Endorsement Fee—LPN \$ 26.00;
 - (E) Lapsed License Fee
(In addition to renewal fee for each year of lapse) \$ 30.00;
 - (F) School Annual Registration Fee \$ 50.00;
 - (G) Verification Fee \$ 5.00;
 - (H) License Renewal Duplicate Fee \$ 5.00;
 - (I) Computer Print-Out of Licensees—not more than \$ 25.00;
 - (J) Biennial Renewal Fee—
 1. RN \$ 46.00;
 2. LPN \$ 38.00;
 3. License renewal for a professional nurse shall be biennial; occurring on odd numbered years and the license shall expire on April 30 of each odd-numbered year beginning with the 1997 1999 renewal period. License renewal for a practical nurse shall be biennial; occurring on even numbered years and the license shall expire on May 31 of each even-numbered year beginning with the 1998 2000 renewal period. Renewal shall be for a twenty-four (24)-month period except in instances when renewal for a greater or lesser number of months is caused by acts or policies of the Missouri State Board of Nursing. Renewal applications (see 4 CSR 200-4.020) shall be mailed every even-numbered year by the Missouri State Board of Nursing to all LPNs currently licensed and every odd numbered year to all RNs currently licensed;
 4. A renewal fee of forty-six dollars (\$46) every other year for an RN effective with the 1997-1999 renewal period and thirty-eight dollars (\$38) every other year for an LPN effective with the 1998-2000 renewal period shall be accepted by the Missouri State Board of Nursing only if accompanied by an appropriately completed renewal application; and
 5. All fees established for licensure or licensure renewal of nurses incorporate an educational surcharge in the amount of one dollar (\$1) per year for practical nurses and five dollars (\$5) per year for professional nurses. These funds are deposited in the professional and

- practical nursing student loan and nurse repayment fund;
- (K) Photostatic Copy Fee
(per page) \$ 0.25;
- (L) Gathering Data. Information requested from the board by members of the public which requires staff man hours for collection—
first eight (8) hours \$ 0.00;
(per hour) \$ 10.00;
each hour after that \$ 10.00;
- (M) Review and Challenge Fees—
 1. LPN \$100.00;
and
 2. RN \$100.00;
- (N) Uncollectible Fee (Charged for any uncollectible check or other uncollectible financial instrument submitted to the Missouri State Board of Nursing.) \$ 25.00;
- (O) Fee for Late Education Agenda Items \$ 30.00;
- (P) Application Fee for Proposals to Establish New Programs of Nursing \$500.00;
and
- (Q) Application Fee for Advanced Practice Nurse Eligibility \$ 75.00.

- (2) All fees are nonrefundable.
- (3) The provisions of this rule are declared severable. If any fee fixed by this rule is held invalid by a court of competent jurisdiction or by the Administrative Hearing Commission, the remaining provisions of this rule shall remain in full force and effect, unless otherwise determined by a court of competent jurisdiction or by the Administrative Hearing Commission.

AUTHORITY: sections 335.036 and 335.046, RSMo (1994).^{*} Emergency rule filed Aug. 13, 1981, effective Aug. 23, 1981, expired Dec. 11, 1981. Original rule filed Aug. 13, 1981, effective Nov. 12, 1981. Emergency amendment filed Feb. 10, 1982, effective Feb. 20, 1982, expired June 20, 1982. Amended: Filed Feb. 10, 1982, effective May 13, 1982. Amended: Filed May 13, 1982, effective Aug. 12, 1982. Amended: Filed Oct. 13, 1982, effective Jan. 13, 1983. Amended: Filed Dec. 13, 1983, effective March 11, 1984. Amended: Filed June 29, 1984, effective Nov. 11, 1984. Amended: Filed Nov. 14, 1986, effective Feb. 12, 1987. Amended: Filed Oct. 28, 1988, effective March 11, 1989. Amended: Filed Aug. 11, 1989, effective Dec. 11, 1989. Amended: Filed Nov. 2, 1990, effective March 14, 1991. Amended: Filed Feb. 4, 1991, effective Aug. 30, 1991. Amended: Filed Aug. 27, 1992, effective April 8, 1993. Amended: Filed May 21, 1993, effective Nov. 8, 1993. Amended: Filed Sept. 7, 1993, effective May 9, 1994. Amended: Filed May 5, 1994, effective Oct. 30, 1994. Amended: Filed Oct. 25, 1995, effective June 30, 1996. Amended: Filed Feb. 15, 1996, effective Aug. 30, 1996.

^{*}Original authority: 335.036, RSMo (1975), amended 1981, 1985, 1993, 1995 and 335.046, RSMo (1975), amended 1981, 1995.

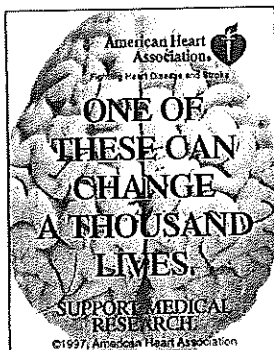
4 CSR 200-4.020 Requirements for Licensure

PURPOSE: This rule sets out requirements for licensure in Missouri of registered professional nurses and licensed practical nurses by examination, endorsement and renewal.

PUBLISHER'S NOTE: The publication of the full text of the material that the adopting agency has incorporated by reference in this rule would be unduly cumbersome or expensive. Therefore, the full text of that material will be made available to any interested person at both the Office of the Secretary of State and the office of the adopting agency, pursuant to section 536.031.4, RSMo. Such material will be provided at the cost established by state law.

- (1) Examination.
 - (A) Written examination as used in Chapter 335, RSMo shall mean either a paper and pencil examination or a computerized adaptive examination.
 - (B) The registered professional nurse (RN) candidate shall have successfully completed the basic prescribed curriculum and received a degree or diploma from a school with an accredited professional nursing program. The practical nurse candidate shall have successfully completed a basic prescribed curriculum in an accredited school of practical nursing and have earned a practical nursing degree, diploma or certificate or completed a comparable period of training as determined by the board. A comparable period of training as determined by the board shall mean graduation from an accredited professional nursing program with validation by examination of a personal and vocational concepts course by an accredited practical nursing program or graduation from the peacetime Army Clinical Specialist Course: MOS; 91C20(6-60).
 - (C) The candidate shall make written application to the Missouri State Board of Nursing for permission to be admitted to the licensing examination for professional/practical nurses. Application forms for the

Continued to page 20



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MISSOURI CODE OF STATE REGULATIONS (Continued from page 19)

licensing examination shall be obtained from the Missouri State Board of Nursing.

1. A request for forms shall be made by the director of the program of professional/practical nursing and should include the names and completion dates of candidates who expect to apply for admission to the examination.
2. Application forms for out-of-state/country graduates may be obtained by writing the State Board of Nursing, giving name, address, name and address of school of nursing and completion date.
3. Any applicant applying for the practical nurse licensing examination who is deficient in theory, clinical experience, or both, as stated in the Minimum Standards for Accredited Programs of Practical Nursing, and has not earned a practical nursing degree or met the requirements for a comparable period of training as determined by the board (4 CSR 200-4.020(1)(B)), will not be approved.

(D) A completed application for the licensing examination signed and accompanied by one (1) two-inch by two-inch (2" x 2") portrait/photograph of the applicant shall be submitted to the Missouri State Board of Nursing for evaluation along with the required examination fee, two (2) sets of his/her fingerprints and the fingerprinting fee as charged by the Missouri State Highway Patrol and Federal Bureau of Investigation prior to the established deadline date set by the Missouri State Board of Nursing. All fees are nonrefundable. Note: The name appearing on the application will be the only legal name of the individual recognized by the Missouri State Board of Nursing unless evidence of the change in name has been submitted.

- (E) An application for a candidate's first licensing examination in Missouri shall bear the school seal and the signature of the director of the program of professional/practical nursing. This shall indicate the endorsement of the candidate to take the licensing examination. The affidavit portion of the application shall be properly executed before a notary public.
- (F) Applicants approved by the Missouri State Board of Nursing as eligible to take the licensing examination for professional/practical nurses shall be notified and forwarded identifying material and specific information as to date, time and place. Candidates shall take the current National Council of State Boards of Nursing, Incorporated Licensure Examination for professional/practical nurses.
- (G) Prior to the Missouri State Board of Nursing use of computerized adaptive testing, the term first licensing examination scheduled by the board, as used in section 335.081, RSMo, shall mean the pencil and paper National Council of State Boards of Nursing licensure examination administered to all applicants on the same day. After the Missouri State Board of Nursing uses computerized adaptive testing as the sole means of examination for licensure, the term first licensing examination scheduled by the board, as used in section 335.081, RSMo, shall mean the first licensure examination taken by the student which must be taken within ninety (90) days of graduation.
- (H) An applicant for licensure by endorsement or licensure by examination who answers yes to one (1) or more of the questions on the application or the fingerprint checks reveal charges and/or convictions which relate to possible grounds for denial of licensure under section 335.066, RSMo shall submit copies of appropriate

documents, as requested by the board, related to that answer or the fingerprint check before his/her application will be considered complete. The copies shall be certified if they are records of a court or administrative government agency. An applicant for licensure by endorsement or licensure by examination who the executive director or designee determines may not meet the requirements for licensure or examination shall be notified that the application will be reviewed by the members of the board at the board's next regular scheduled meeting following receipt of all requested documents. The Missouri State Board of Nursing shall notify, by certified mail or delivery, any individual who is refused permission to take an examination for licensure or an individual licensed in another state, territory or foreign country that is denied a license by endorsement without examination. At the time of notification, this individual is to be made aware of his/her avenue of appeal through the Missouri Administrative Hearing Commission.

- (I) A passing designation as determined by the Missouri State Board of Nursing shall be attained by candidates to qualify for licensure to practice professional/practical nursing in Missouri. Results of the licensing examination shall be reported only by pass/fail designation to candidates and to directors of programs of professional/practical nursing.
- (J) An original examination report shall be forwarded to the examinee. A copy shall be retained in the permanent application on file in the Missouri State Board of Nursing office. A composite report shall be forwarded to the director of each program of professional/practical nursing listing the names of the candidates and the pass/fail designation for each candidate.
- (K) A transcript of the final record shall be submitted to the Missouri State Board of Nursing for each applicant upon completion of the program of professional/practical nursing. The seal, if available, of the school and signature of the director of the program of professional/practical nursing or registrar shall be affixed to the transcript. The transcript must include the degree awarded and date of graduation. A candidate cannot take the licensure examination until all licensure requirements are met, including providing a transcript.
- (L) There shall be a thirty (30)-day grace period for graduates who have successfully passed the first available licensing examination in another state following graduation to obtain a temporary permit or license in Missouri after the graduate has received his/her results.
- (M) Requests for Examination Modification.

Continued to page 21

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MISSOURI CODE OF STATE REGULATIONS (Continued from page 20)

1. The Missouri State Board of Nursing and its test service shall determine if a candidate shall be allowed modification of the examination if the candidate requests the modification because of a disability defined by the American with Disabilities Act.
 2. The candidate requesting modification shall submit a request to the Missouri State Board of Nursing. The request shall contain
 - A. A letter from the candidate's nursing education program indicating what modifications, if any, were granted by that program;
 - B. Appropriate documentation supporting the request for accommodation from a qualified professional with expertise in the areas of the diagnosed disability. Documentation must include:
 - (I) A history of the disability and any past accommodation granted the candidate and a description of its impact on the individual's functioning;
 - (II) Identification of the specific standardized and professionally recognized tests/assessments given (e.g. Woodcock-Johnson, Weschlet Adult Intelligence Scale);
 - (III) Clinical diagnoses of disability (where applicable, list the DSM Code Number and Title);
 - (IV) The scores resulting from testing, interpretation of the scores and evaluations; and
 - (V) Recommendations for testing accommodations with a stated rationale as to why the requested accommodation is necessary and appropriate for the diagnosed disability; and
 - C. A letter from the applicant requesting the modifications detailing the specific modifications and explaining the rationale for the modifications.
 3. When the request is received from the candidate with the previously listed items, the request will be reviewed.
 4. If approved, a request for modification of an examination will be submitted to the National Council of State Boards of Nursing, Incorporated.
 5. After the National Council of State Boards of Nursing, Incorporated has reported its decision to the Missouri State Board of Nursing, the candidate will be notified of the decision.
 6. A handicapped individual is defined in the Rehabilitation Act of 1973.
- (2) Repeat Examination.
- (A) A candidate who does not achieve the passing designation as determined by the Missouri State Board of Nursing shall not qualify to receive a license to practice professional/practical nursing in Missouri. It shall be unlawful for any person to practice professional/practical nursing in Missouri as a graduate nurse after failure of the National Council of State Boards of Nursing, Incorporated licensure examination until successfully passing the examination and receiving a license.
 - (B) A candidate who does not achieve the

passing designation who wishes to review, challenge, or both, the National Council Licensure Examination must send a written letter of request to the Missouri State Board of Nursing office no later than four (4) months after release of examination results to the candidate.

- (C) If approved, the request is submitted to the National Council of State Boards of Nursing, Incorporated. A board fee may be charged.
 - (D) A candidate who does not achieve the passing designation shall be notified. No further examination notices shall be issued by the Missouri State Board of Nursing.
 - (E) The required fee shall be submitted to the Missouri State Board of Nursing office each time the candidate applies for the examination and is nonrefundable.
- (3) A graduate of a nursing program may practice as a graduate nurse until s/he has received the results of the first licensure examination taken by the nurse or until ninety (90) days after graduation, whichever first occurs.

(4) Passing Score.

(A) The standard score of three hundred fifty (350) in each subject of the State Board Test Pool Examination for Registered Nurses shall be the Missouri passing score beginning with series 949 through series 282. Candidates writing the licensing examination prior to the date series 949 was given shall have no grade below sixty-five percent (65%) and shall have attained an average score of seventy percent (70%). Beginning July 1982, the standardized scoring system to be used with the National Council Licensure Examination for Registered Nurses will have a passing score of sixteen hundred (1600). Beginning February 1989, to be eligible for licensure, a candidate must achieve a pass designation on the National Council Licensure Examination for Registered Nurses.

(B) For the period March 1, 1954 through February 28, 1958, seventy percent (70%) was required for passing the practical nurse examination. For the period March 1, 1958 to December 31, 1958, the standard score of three hundred (300) was the minimum passing score for the practical nurse examination. As of January 1, 1959, the standard score of three hundred fifty (350) shall be the minimum passing score in Missouri for the State Board of Nursing Test Pool Licensing Examination or the National Council Licensure Examination for Practical Nurses. Beginning October 1988, to be eligible for licensure, a candidate must achieve a pass designation on the National Council Licensure Examination for Practical Nurses.

- (5) Licensure by Endorsement in Missouri - Registered Nurses (RNs) and Licensed Practical Nurses (LPNs).

(A) A professional/practical nurse licensed in another state or territory of the United States or Canada shall be entitled to licensure provided qualifications are equivalent to the requirements of Missouri at the time of original licensure. This equivalency shall be defined as -

1. Evidence of completion and graduation from an accredited program of professional/practical nursing;
2. Attainment of a passing standard score or pass designation as determined by the Missouri State Board of Nursing on the licensing examination or attainment of an acceptable grade in areas comparable to those required in Missouri at the time licensure was secured in the state of original licensure;
3. Evidence of completion of the applicable secondary education set forth in section 335.046, RSMo requirements or the equivalent as determined by the State Department of Education;
4. Applicants who are not citizens of the United States who have completed programs in schools of professional/practical nursing in states which require citizenship for licensure may take the National Council Licensure Examination for professional/practical nurses in Missouri if they meet all of Missouri's requirements; and
5. If an individual was licensed by waiver as a practical/vocational nurse in another state, territory or foreign country prior to July 1, 1955, and the individual meets the requirements for licensure as a practical nurse in Missouri which were in effect at the time the individual was licensed in the other jurisdiction, s/he is eligible for licensure in Missouri as an LPN. If an individual is licensed by waiver in another state after July 1, 1955, s/he does not qualify for licensure by waiver in Missouri as a practical nurse.

(B) Procedure for Application.

1. An applicant should request an application for endorsement licensure from the Missouri State Board of Nursing. The request shall include the full name, current mailing address and state of original licensure.
2. The application for endorsement licensure shall be completed in black ink with the affidavit portion properly executed before a notary public and submitted with the required application fee, two (2) sets of his/her fingerprints and the fingerprinting fee as charged by the Missouri State Highway Patrol and

Continued to page 22

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MISSOURI CODE OF STATE REGULATIONS (Continued from page 21)

Federal Bureau of Investigation. All fees are nonrefundable. The application shall be submitted to the Missouri State Board of Nursing.

3. The endorsement/verification of licensure form shall be forwarded by the applicant to the board of nursing for completion in the state or territory of original licensure by examination, or to Canada, with a request to submit the completed form to the Missouri State Board of Nursing.
4. The applicant shall cause an official nursing transcript to be forwarded directly to the Missouri State Board of Nursing office if a transcript is requested by the executive director or designee.
5. A final evaluation of the submitted application shall be made only after all required credentials are assembled.
6. The applicant shall be notified of this evaluation for licensure.
- (6) Applicants Not Meeting Requirements.
 - (A) An applicant who does not meet the Missouri requirements for licensure at the time of completion of a program of professional/practical nursing shall be advised regarding the necessary steps for qualification on the basis of the particular deficiency.
 - (B) An applicant who has not attained the passing score or grade on the licensing examination as required by the Missouri State Board of Nursing at the time of original licensure shall be required to take the current National Council Licensure Examination (NCLEX®) and receive a pass designation prior to licensure.
 - (C) A professional/practical nurse licensed in another state or territory of the United States shall be entitled to licensure; provided, qualifications are equivalent to the requirements in Missouri at the time of original licensure.
- (7) Canadian Nurses' Association Testing Service (CNATS). The Missouri State Board of Nursing recognizes the English Language Administration of the CNATS Examination and nurses who have successfully passed this examination shall be granted RN licensure by endorsement providing they meet the minimal educational requirements in Missouri in effect at the time of original licensure. Applicants for licensure by endorsement who have been licensed in Canada on the basis of a passing score on the French Language Administration of the CNATS Examination will be required to demonstrate proficiency in the English language by meeting one (1) of the following criteria:

- (A) Completion of an accredited nursing program or its equivalent in the United States;
- (B) A minimum score of fifty (50) in each section of the Test of English as a Foreign Language (TOEFL) Examination;
- (C) Completion of a nursing program given in English in another country;
- (D) A passing score on a nursing licensure examination which is given in English;
- (E) A certificate from the Commission on Graduates of Foreign Nursing Schools (CGFNS); or
- (F) Any method of proof previously accepted by the Missouri State Board of Nursing.
- (8) Temporary Permit. Applicants wishing to practice professional/practical nursing in Missouri following the evaluation of the application and transcript, if requested to determine if the applicant meets licensure requirements in Missouri, should submit a copy of a current nursing license from another state, territory or Canada. A temporary permit may be secured for a limited period of time six (6) months until licensure is granted or denied by the Missouri State Board of Nursing or until the temporary permit expires, whichever comes first. If the applicant does not hold a current nursing license in another state, territory or Canada, a temporary permit may be issued upon receipt of a completed endorsement verification of licensure form and transcript, if requested. Applicants from Canada may apply for a temporary permit provided for by rule.
- (9) Intercountry Licensure by Examination in Missouri RN and LPN.
 - (A) Application Procedure.
 1. A professional/practical nurse licensed outside of the United States or Canada shall be entitled to apply to take the examination for licensure if, in the opinion of the Missouri State Board of Nursing, current requirements for licensure in Missouri are met.
 2. An applicant must request, in writing, an Application for Professional/Practical Nurse Licensure by Examination. The request shall include the applicant's full name, current mailing address and country of original licensure. The application shall be properly executed by the applicant in black ink and shall be included in the documents submitted to the Missouri State Board of Nursing for evaluation with the required credentials. All original documents shall be returned to the applicant. Credentials in a foreign language shall be translated into English, the translation shall be signed by the

translator and the signature shall be notarized by a notary public. The translation shall be attached to the credentials in a foreign language when submitted to the Missouri State Board of Nursing.

3. The required credentials for practical nurse applicants are
 - A. A course-by-course evaluation report received directly from a foreign credentials evaluation service approved by the board;
 - B. A photostatic copy of birth certificate (if a copy of birth certificate is not available, copy of baptismal certificate, passport or notarized statement from an authorized agency will be accepted as verification of name, date of birth and place of birth);
 - C. Photostatic copy of marriage license/certificate (if applicable);
 - D. TOEFL certificate indicating successful completion of examination. Foreign practical nurse applicants from non-English speaking countries or from English speaking countries with different native language shall be required to take the TOEFL and attain a minimum score of fifty (50) in each section. When the applicant achieves a score of fifty (50) in each section of the test, the board of nursing will not address itself to that section should there be a required repeat of the examination for other sections;
 - E. Test of Spoken English (TSE®) Certificate indicating that the applicant has obtained a minimum overall score of forty-five (45).
 - F. The certification of licensure form from the licensing agency where the original registration by examination was secured;
 - G. Photostatic copy of original license issued by the licensing agency where original licensure/registration was secured by examination; and
 - H. The completed application must be accompanied by one (1) two-inch by two-inch (2" x 2") portrait photograph of the applicant, two (2) sets of his/her fingerprints, the fingerprinting fee as charged by the Missouri State Highway Patrol and Federal Bureau of Investigation and the required application fee. All fees are nonrefundable.

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MISSOURI CODE OF STATE REGULATIONS (Continued from page 22)

4. The required credentials for professional nurse applicants are
- Commission on Graduates of Foreign Nursing Schools (CGFNS) Certificate. The CGFNS agency must forward the certificate to our office. This certification must signify a passing grade on the CGFNS English language and nursing practice proficiency examination as evidence of meeting similar qualifications of graduates of nursing programs in Missouri for the purpose of qualifying for admission to the licensure examination.
 - A photostatic copy of birth certificate (if a copy of birth certificate is not available, a copy of baptismal certificate, passport or notarized statement from authorized agency will be accepted as verification of name, date of birth and place of birth);
 - Photostatic copy of original license or certificate issued by the licensing agency where original licensure/registration was secured by examination;
 - Photostatic copy of marriage license/certificate (if applicable);
 - The certificate of licensure form from the licensing agency where the original registration/licensure by examination was secured; and
 - The completed examination application with the required examination fee, one (1) two-inch by two-inch (2" x 2") portrait/photograph of the applicant, two (2) sets of his/her fingerprints, the fingerprinting fee as charged by the Missouri State Highway Patrol and Federal Bureau of Investigation and all the credentials shall be submitted to the Missouri State Board of Nursing.
- (B) Unqualified Applicants. An applicant who does not meet Missouri's current minimum requirements for licensure shall be advised regarding the necessary steps for qualification.
- (C) The board of nursing will cooperate with the United States Immigration Service by advising it of the status of the applicant for nursing licensure if requested.
- (10) Guidelines for Evaluating Intercounty Transcripts.
- An applicant who has secured original licensure outside of the United States and has been licensed by examination in another state, territory or Canada may be licensed in Missouri if the applicant qualifies for licensure by endorsement from that state, territory or Canada under section (4). Each applicant under this section must cause a photostatic copy of a nursing transcript to be provided to the board office, except that RN applicants instead may cause the CGFNS to submit directly to the board office a CGFNS certificate indicating successful completion of the CGFNS examination in place of the school of nursing transcript.
 - Guidelines for evaluating intercountry transcripts for professional/practical nurse applicants are the minimum standards for accredited schools in Missouri in effect at the time the candidate originally became licensed by examination in another state, territory or Canada or at the time of application.
- (11) Licensure Renewal.
- Renewal periods shall be for one (1), two (2), or three (3) years as determined by the board.
 - The required fee shall be submitted prior to the date the license lapses.
 - In answer to requests for information regarding an individual's licensure, the staff of the board will verify status and other information as deemed appropriate by the executive director.
- (12) Inactive Licensures.
- Any nurse possessing a current license to practice nursing in Missouri may place that

license on inactive status by filing a written and signed request for inactive status with the board. This request may be accomplished, but need not be, by signing the request for inactive status which appears on the nurse's application for license renewal and returning that application to the board prior to the date the license has lapsed.

- (B) Individuals wishing to reactivate licenses after being carried as inactive shall request a Petition for Renewal from the Missouri State Board of Nursing. Fees shall be accepted only if accompanied by a completed Petition for Renewal. Back fees shall not be required for the years the licensee's records were carried as inactive. The Petition for Renewal shall show, under oath or affirmation of the nurse, a statement
- That the nurse is not presently practicing nursing in Missouri; and
 - As to whether the nurse did practice nursing while the license was inactive and, if so, how long and where. If the nurse was practicing nursing in Missouri at the time his/her license was inactive, s/he also must submit a notarized statement indicating that s/he ceased working as soon as s/he realized that the license was inactive. In addition, the nurse must cause his/her employer to submit a statement on the employer's letterhead stationery or a notarized statement indicating that the nurse ceased working as soon as s/he realized that the license was inactive.
- (C) No person shall practice nursing or hold him/herself out as a nurse in Missouri while his/her license is inactive.
- (D) A nurse who petitions for renewal of an inactive license who answers yes to one (1) or more of the questions on the petition which relate to possible grounds for denial of renewal under section 335.066, RSMo,

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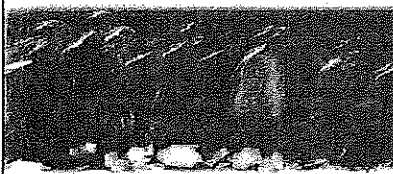
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Amended: Filed Oct. 17, 1991, effective April 9, 1992.
 Amended: Filed March 5, 1992, effective Aug. 6, 1992.
 Emergency amendment filed May 14, 1993, effective May 24, 1993, expired Sept. 20, 1993. Amended: Filed May 14, 1993, effective Nov. 8, 1993. Amended: Filed June 29, 1993, effective Jan. 13, 1994. Amended: Filed Sept. 7, 1993, effective May 9, 1994. Amended: Filed Feb. 2, 1994, effective July 30, 1994. Amended: Filed Dec. 15, 1995, effective June 30, 1996. Amended: Filed Jan. 29, 1996, effective July 30, 1996. Amended: Filed July 27, 1996, effective Jan. 30, 1999.

*Original authority: 335.036, RSMo 1975, amended 1981, 1985, 1993, 1995; 335.046, RSMo 1975, amended 1981, 1995; and 335.051, RSMo 1975, amended 1981.

4 CSR 200-4.021 Graduate Temporary Permit

PURPOSE: This rule provides individuals who are recent graduates with a mechanism for determining whether or not the individual falls within the exemption found in section 335.081(6), RSMo.

(1) In order to establish a system where individuals recently graduated from nursing programs in another state, territory, Canada or foreign country and potential Missouri employers can determine whether or not the graduate may practice under the exemption found in section 335.081(6), RSMo, a graduate temporary permit is created. Issuance of the graduate temporary permit is not a prerequisite to practice under the exemption found in section 335.081(6), RSMo.

(2) The following conditions must be met before a graduate temporary permit will be issued:

- (A) The individual must provide the following information on a form provided by the board:
1. Full name;
 2. Address of individual;
 3. Name of school of nursing;
 4. Address of school of nursing; and
 5. Date individual graduated from school of nursing;

(B) The form must be signed by the individual. The individual then must send the form to the government agency which regulates nursing in the state or territory in which the individual is scheduled to take the licensure exam or the state or territory in which the individual took the licensure exam;

(C) The government agency must send the form directly to the Missouri State Board of Nursing. The government agency must include the following information on the form:

1. That the individual is scheduled to take the licensure examination or that the individual has taken the licensure examination;
2. The date(s) on which the individual is scheduled to take or took the licensure exam;
3. Whether or not this will be or was the individual's first time to take the licensure exam;
4. The approximate expected date of the test results of the examination;
5. The signature and title of the government official who completed the form;
6. The state, territory or province in which the government agency is located;
7. The date on which the government official signed the form; and
8. The seal of the government agency, if applicable;

(D) At its discretion, the board may accept an official school transcript specifying graduation date instead of the information provided directly by the government agency. The applicant must provide directly to the board the information requested on the top portion of the application; and

(E) The individual, to the extent possible, must complete the application for licensure in Missouri and file it with the Missouri State

Board of Nursing accompanied by the fee required for licensure in Missouri.

(3) The graduate temporary permit automatically will terminate and expire if the individual does not pass the licensure exam successfully. At that time, the individual will no longer fall within the exemption found in section 335.081(6), RSMo and the individual may not perform the functions or duties of a professional nurse or practical nurse in Missouri.

AUTHORITY: section 335.036, RSMo (1986). * Original rule filed Sept. 13, 1983, effective Dec. 11, 1983. Amended: Filed Dec. 13, 1989, effective Feb. 25, 1990.

*Original authority 1975, amended 1981, 1985.

4 CSR 200-4.030 Public Complaint Handling and Disposition Procedure

PURPOSE: This rule establishes a procedure for the receipt, handling and disposition of public complaints by the board, pursuant to the mandate of section 4.16(6) of the Omnibus State Reorganization Act of 1974, Appendix B, RSMo.

(1) The State Board of Nursing shall receive and process each complaint made against any licensee, permit holder, registrant of the board or unlicensed individual or entity, which complaint alleges certain acts or practices which may constitute one (1) or more violations of the provisions of Chapter 335, RSMo. Any member of the public or profession, or any federal, state or local officials may make and file a complaint with the board. Complaints shall be received from sources outside Missouri and processed in the same manner as those originating within Missouri. No member of the State Board of Nursing shall file a complaint with this board while holding that office, unless that member is excused from further board deliberations or activity concerning the matters alleged within that complaint. The executive director or any staff member of the board may

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- file a complaint pursuant to this rule in the same manner as any member of the public.
- (2) Complaints should be mailed or delivered to the following address: Executive Director, Missouri State Board of Nursing, 3523 North Ten Mile Drive, P.O. Box 656, Jefferson City, MO 65102-0656. However, actual receipt of the written complaint by the board at its administrative offices in any manner shall be sufficient. A complaint may be made based upon personal knowledge or upon information and belief, reciting information received from other sources.
 - (3) All complaints shall be made in writing and shall fully identify the complainant by name and address. Complaints may be made on forms which are provided by the board and available upon request. Oral or telephone communications will not be considered or processed as complaints, but the person making these communications will be provided with a complaint form and requested to complete it and return it to the board in written form. Any member of the administrative staff of the board may make and file a complaint based upon information and belief, in reliance upon oral, telephone or written communications received by the board, unless those communications are believed by that staff member to be false.
 - (4) Each complaint received under this rule shall be logged in a book maintained by the board for that purpose. Complaints shall be logged in consecutive order as received. The logbook shall contain a record of each complainant's name and address; the name and address of the subject(s) of the complaint; the date each complaint is received by the board, a brief statement of the acts complained of, including the name of any person injured or victimized by the alleged acts or practices; a notation whether the complaint resulted in its dismissal by the board or informal charges being filed with the Administrative Hearing Commission; and the ultimate disposition of the complaint. This logbook shall be a closed record of the board.
 - (5) Each complaint received under this rule shall be acknowledged in writing. The acknowledgement shall state that the complaint is being referred to the board for consideration at its next regularly scheduled meeting. The complainant shall be informed as to whether the complaint is being investigated and later as to whether the complaint has been dismissed by the board or is being referred to legal counsel for filing with the Administrative Hearing Commission. The complainant shall be notified of the disciplinary action taken, if any. The provisions of this section shall not apply to complaints filed by staff members of the board based on information and belief, acting in reliance on third-party information received by the board.
 - (6) Both the complaint and any information obtained as a result of the investigation of the complaint shall be considered a closed record and shall not be available for inspection by the general public.
 - (7) This rule shall not be deemed to limit the board's authority to file a complaint with the Administrative Hearing Commission charging a licensee of the board with any actionable conduct or violation, whether or not such a complaint exceeds the scope of the acts charged in a preliminary public complaint filed with the board and whether or not any public complaint has been filed with the board.
 - (8) The board interprets this rule, which is required by law, to exist for the benefit of those members of the public who submit complaints to the board and for those persons or entities within the legislative and executive branches of government having supervisory or other responsibilities or control over the professional licensing boards. This rule is not deemed to protect or insure to the benefit of, those licensees, permit holders, registrants or other persons against whom the board has instituted

or may institute administrative or judicial proceeding concerning possible violations of the provisions of Chapter 335, RSMo.

AUTHORITY: sections 4.16(6) of the Omnibus State Reorganization Act of 1974, Appendix B and 335.036, RSMo (1986). Original rule filed Feb. 10, 1982, effective May 13, 1982.

*Original authority: Omnibus State Reorganization Act of 1974, RSMo (1973), amended 1977, 1980 and 335.036, RSMo (1975), amended 1981, 1985.

4 CSR 200-4.040 Mandatory Reporting Rule

PURPOSE: This rule establishes a procedure and guidelines regarding reports required from hospitals or ambulatory surgical centers by section 383.133, RSMo concerning any final disciplinary action against a nurse licensed under Chapter 335, RSMo or the voluntary resignation of any such nurse.

- (1) The Missouri State Board of Nursing shall receive and process any report from a hospital or ambulatory surgical center concerning any disciplinary action against a nurse licensed under Chapter 335, RSMo or the voluntary resignation of any such nurse against whom any complaints or reports have been made which might have led to disciplinary action.
- (2) Reports to the board shall be in writing and shall comply with the minimum requirements as set forth in section 383.133.2, RSMo and this rule. The Board of Nursing will assume that all reports received from hospitals or ambulatory surgical centers will be treated as under section 383.133, RSMo. The information shall be submitted within fifteen (15) days of the final disciplinary action, and shall contain, but need not be limited to—
 - (A) The name, address and telephone number of the person making the report;
 - (B) The name, address and telephone number of the person who is the subject of the report;
 - (C) A brief description of the facts which gave rise to the issuance of the report, including

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- the dates of occurrence deemed to necessitate the filing of the report;
- (D) If court action is involved and known to the reporting agent, the identity of the court, including the date of filing and the docket number of the action; and
- (E) A statement as to what final action was taken by the institution.
- (3) Any activity that is construed to be a cause for disciplinary action according to section 335.086, RSMo shall be deemed reportable to the board. Nothing in this rule shall be construed as limiting or prohibiting any person from reporting a violation of the Nursing Practice Act directly to the Missouri State Board of Nursing.
- (4) In cases where a nurse voluntarily submits to an employee assistance program or to a rehabilitation program for alcohol or drug impairment and no disciplinary action is taken by the facility, the facility is not mandated to report but may report. If the nurse is subsequently disciplined by the facility for violating provisions of the employee assistance program or rehabilitation program or voluntarily resigns in lieu of discipline, the facility must report to the board under the above provision.
- (5) In response to a written or verbal inquiry from a hospital or ambulatory surgical center regarding reports received by the board on a specific nurse, the board may provide the following information:
- (A) Whether any reports have been received;
- (B) The nature of the action taken; and
- (C) Disciplinary action which the board took on each report or if the board has taken action on the report.

AUTHORITY: section 383.133, RSMo (1994). * Original rule filed Aug. 5, 1987, effective Nov. 12, 1987. Amended: Filed Jan. 8, 1988, effective April 28, 1988. Amended: Filed April 19, 1996, effective Nov. 30, 1996.

*Original authority 1986.

4 CSR 200-4.050 Nursing Student Loan Program

PURPOSE: This rule defines the criteria that a nursing program must meet for approval by the Missouri State Board of Nursing as a participating program in the professional and practical nursing student loan program.

- (1) The board shall designate as approved for participation in the professional and practical nursing student loan program those Missouri nursing programs which meet the following criteria:
- (A) The nursing program leads to initial licensure as a professional or practical nurse and is accredited as a program of

professional or practical nursing by the Missouri State Board of Nursing; or

- (B) The nursing program does not lead to initial licensure, but offers a formal course of instruction leading to a bachelor of science degree in nursing or a master of science degree in nursing and the nursing program annually submits to the Missouri State Board of Nursing an application for approval as a participating school, which provides evidence of—
1. The existence of a separate and distinct nursing department within the degree-granting institution; and
 2. A curriculum plan incorporating both nursing theory and clinical nursing experience as integral components of the course of instruction.

(2) Student Eligibility.

(A) The State Board of Nursing will consider the following factors to determine whether an eligible student is approved for participation in the nursing student loan program:

1. Criminal convictions;
2. Whether applicant's nursing license has been disciplined by the Missouri State Board of Nursing or any other licensing board;
3. Whether the applicant has been denied a nursing license by any state board of nursing;
4. Whether there are any current or past complaints filed against the nursing license of the applicant;
5. Whether the applicant has been placed on the Department of Social Service's Employee Disqualification List; or
6. Any other information which would indicate that licensure of the applicant would not be in the public interest.

AUTHORITY: section 335.212, RSMo (Cum. Supp. 1990). * Original rule filed Nov. 2, 1990, effective March 14, 1990. Amended: Filed Dec. 30, 1993, effective July 10, 1994.

*Original authority 1990.

4 CSR 200-4.100 Advanced Practice Nurse

PURPOSE: This rule specifies the criteria necessary for registered professional nurses to be recognized by the Missouri State Board of Nursing and therefore eligible to practice as advanced practice nurses and use certain advanced practice nurse titles.

(1) Definitions.

(A) Accredited college or university—An institution of learning awarded accreditation status by the appropriate

regional accreditation body for higher education certified by the Council on Post Secondary Accreditation to conduct such accreditations.

(B) Advanced nursing education program—

1. Prior to July 1, 1998, completion of a formal post-basic educational program from or formally affiliated with an accredited college, university, or hospital of at least one (1) academic year, which includes advanced nursing theory and clinical nursing practice, leading to a graduate degree or certificate with a concentration in an advanced practice nursing clinical specialty area.
2. From and after July 1, 1998, completion of a graduate degree from an accredited college or university with a concentration in an advanced practice nursing clinical specialty area, which includes advanced nursing theory and clinical nursing practice.

(C) Advanced practice nurse—A registered professional nurse as defined in section 335.016(2), RSMo and who is a nurse anesthetist, nurse midwife, nurse practitioner, or clinical nurse specialist.

(D) Advanced practice nursing clinical specialty—Recognized advanced body of nursing knowledge and specialized acts of advanced professional nursing practice.

(E) Nationally recognized certifying body—An entity endorsed by a nationally recognized professional nursing organization acceptable to the Missouri State Board of Nursing which, through formal and ongoing processes of evaluation and verification, certifies that a licensed registered professional nurse has met predetermined professional nursing practice standards in an advanced practice nursing clinical specialty area and which meets the criteria specified in section (6) of this rule.

(F) Nationally recognized professional nursing organization—A membership entity for registered professional nurses in the United States whose intention is national in scope and exists, in part, for the ongoing purposes of—

1. Fostering high standards for professional nursing practice;
2. Promoting the professional development and general welfare of registered professional nurses;
3. Improving the health and well-being of individuals, families, and communities in collaboration with other health care providers; and
4. Engaging in action at the national level on matters of professional policy and national health policy.

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(2) Eligibility Criteria for Nurses with Specialty Certification.

(A) Registered professional nurses who are certified registered nurse anesthetists, certified nurse midwives, certified nurse practitioners, or certified clinical nurse specialists applying for recognition from the Missouri State Board of Nursing for eligibility to practice as advanced practice nurses shall—

1. Hold current license to practice in Missouri as registered professional nurses; and
2. Be certified in their respective advanced practice nursing clinical specialty area by a nationally recognized certifying body, meeting the requirements of this rule; and
3. Submit documented evidence of satisfactory, active, up-to-date certification/recertification/maintenance and/or continuing education/competency status to the board.

(3) Eligibility Criteria for Nurses Without Specialty Certification.

(A) Registered professional nurses for whom no advanced practice nursing clinical specialty certification from a nationally recognized certifying body is available applying for recognition from the Missouri State Board of Nursing for eligibility to practice as advanced practice nurses shall—

1. Hold current license to practice in Missouri as registered professional nurses; and
2. Demonstrate their education, training, and experience to practice advanced practice nursing by—
 - A. Providing evidence of having successfully completed an advanced nursing education program as defined in subsection (1)(B); and
 - B. Submitting evidence of successful completion of three (3) graduate credit hours of pharmacology offered by an accredited college or university within the previous five (5) years

prior to date of application to the board; and

C. Submitting evidence of a minimum of fifteen hundred (1500) hours of clinical practice in the advanced practice nursing clinical specialty area within the previous two (2) years prior to date of application to the board; and

3. Subsection (3)(A) does not apply to those registered professional nurses for whom a board-accepted nationally recognized advanced practice nursing clinical specialty area certification examination exists or is available.

(B) Registered professional nurses who are graduate registered nurse anesthetists, graduate nurse midwives, graduate nurse practitioners, or graduate clinical nurse specialists applying for recognition from the Missouri State Board of Nursing for eligibility to practice as advanced practice nurses shall—

1. Hold current license to practice in Missouri as registered professional nurses; and
2. Provide evidence of having successfully completed an advanced nursing education program as defined in subsection (1)(B); and
3. Be within period between graduation from advanced nursing education program and the receipt of results of the first available certification examination administered after graduation by a nationally recognized certifying body acceptable to the Missouri State Board of Nursing, followed by notification of results to the board within five (5) working days of receipt of results and, if notification is of unsuccessful certification examination results, then continued recognition and practice as an advanced practice nurse in Missouri is immediately terminated; and
4. Subsection (3)(B) applies only to graduate registered professional nurses for whom a board-accepted nationally recognized advanced practice nursing clinical specialty area certification examination exists or is available.

(4) Titling.

(A) After June 30, 1997, only a registered professional nurse meeting the requirements of this rule and recognized by the Missouri State Board of Nursing as an advanced practice nurse shall have the right to use any of the following titles or their abbreviations in clinical practice: advanced practice nurse, certified advanced practice

nurse, nurse anesthetist, certified registered nurse anesthetist, nurse midwife, certified nurse midwife, nurse practitioner, certified nurse practitioner, clinical nurse specialist, or certified clinical nurse specialist.

(B) Registered professional nurses recognized as advanced practice nurses by the Missouri State Board of Nursing shall specify their registered professional nurse title, clinical nursing specialty area designation, and certification status, if applicable, for purposes of identification and documentation. Advanced practice nurses will be held accountable by the board for representing themselves accurately and fully to the public, their employers, and other health care providers.

(5) Scope of Practice.

(A) Registered professional nurses recognized by the Missouri State Board of Nursing as being eligible to practice as advanced practice nurses shall function clinically—

1. Within the state of Missouri Nursing Practice Act, Chapter 335, RSMo, and all other applicable rules and regulations; and
2. Within the professional scope and standards of their advanced practice nursing, clinical specialty area and consistent with their formal advanced nursing education and national certification, if applicable, or within their education, training, knowledge, judgement, skill, and competence as registered professional nurses.

(6) Certifying Body Criteria.

(A) In order to be a certifying body acceptable to the Missouri State Board of Nursing for advanced practice nurse status, the certifying body must meet the following criteria—

1. Be national in the scope of its credentialing;
2. Have no requirement for an applicant to be a member of any organization;
3. Have formal requirements that are consistent with the requirements of 4 CSR 200-4.100 Advanced Practice Nurse rule;
4. Have an application process and credential review that includes documentation that the applicant's advanced nursing education, which included theory and practice, is in the advanced practice nursing clinical specialty area being considered for certification;
5. Use psychometrically sound and secure examination instruments based on the scope of practice of the advanced practice nursing clinical specialty area;

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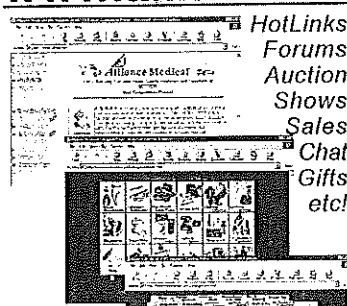
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6. Issue certification based on passing examination and meeting all other certification requirements;
 7. Provide for periodic recertification/maintenance options which include review of qualifications and continued competence; and
 8. Have an evaluation process to provide quality assurance in its certification, recertification, and continuing competency components.
- (B) Each listed certifying body and/or its policies and procedures for certification shall be subject to at least annual review by the Missouri State Board of Nursing to determine whether criteria for recognition under this rule are being maintained.
- (C) The Missouri State Board of Nursing shall identify, keep on file, and make available to the public the current list of nationally recognized certifying bodies acceptable to the board of nursing. Nationally recognized certifying bodies may be added or deleted from the board of nursing's list of nationally recognized certifying bodies based on the criteria set forth in this rule. A copy of the current list can be obtained by contacting the Missouri State Board of Nursing, P.O. Box 656, Jefferson City, MO 65102 or by calling (573) 751-0681.

(7) Application for Recognition.

- (A) After June 30, 1997, the Missouri State Board of Nursing shall maintain an up-to-date roster of registered professional nurses recognized as eligible to practice as advanced practice nurses, which shall be available to the public. A copy of the current roster can be obtained by contacting the Missouri State Board of Nursing, P.O. Box 656, Jefferson City, MO 65102 or by calling (573) 751-0681.
- (B) Registered professional nurses seeking recognition as eligible to practice as advanced practice nurses shall complete and submit an application form, application fee, and all required evidence specified in this rule to the Missouri State Board of Nursing, P.O. Box 656, Jefferson City, MO 65102. Incomplete application forms and evidence will be considered invalid. Fees are not refundable.
- (C) Notwithstanding the provisions of section (2), registered professional nurses seeking licensure by endorsement and recognition as advanced practice nurses in Missouri may receive such recognition under section (2) if—
1. Prior to July 1, 1998, they had completed

a formal post-basic education program from or formally affiliated with an accredited college, university, or hospital, of at least one (1) academic year, which included advanced nursing theory and clinical nursing practice, leading to a graduate degree or a certificate with a concentration in an advanced practice nursing clinical specialty area; and

2. Prior to July 1, 1998, they were certified by a nationally recognized certifying body acceptable to the Missouri State Board of Nursing and have continuously maintained active, up-to-date recertification status.

(8) Continued Recognition.

- (A) Advanced practice nurses who place their registered professional nurse licenses on inactive status or allow their registered professional nurse licenses to lapse shall lose recognition as advanced practice nurses in Missouri.
- (B) Advanced practice nurses shall notify the board within five (5) working days of any change in status, documentation, or other changes that may affect their continued recognition as advanced practice nurses.
- (C) Certified advanced practice nurses shall maintain active, up-to-date recertification status and continuing competency in advanced practice nursing clinical specialty area by actively participating and satisfactorily meeting recertification/maintenance terms and/or continuing education/competency requirements of their nationally recognized certifying body. It is the responsibility of certified advanced practice nurses to submit evidence to the board of active, satisfactory recertification and/or continuing competency status prior to expiration date to prevent removal of recognition as advanced practice nurses by the Missouri State Board of Nursing.
- (D) Noncertified advanced practice nurses recognized by the Missouri State Board of Nursing as being eligible to practice as advanced practice nurses pursuant to subsection (3)(A) shall, within every two (2) years following recognition by the board, submit documented evidence of—
1. A minimum of fifteen-hundred (1500) hours of clinical practice in their advanced practice nursing clinical specialty area; and
 2. A minimum of twenty (20) contact hours in their advanced practice nursing clinical specialty area offered by an accredited college or university.

(E) Advanced practice nurses who fail to satisfy any of the applicable requirements of subsections (8)(A)—(D) shall lose their recognition as an advanced practice nurse. Loss of recognition as an advanced practice nurse results in ineligibility to call oneself or practice as an advanced practice nurse, but does not prevent the individual from practicing as a registered professional nurse within his/her education, training, knowledge, judgement, skill, and competence. To regain recognition as an advanced practice nurse the individual must complete the application process described in section (7) of this rule.

AUTHORITY: section 335.016(2) and 335.036, RSMo (Cum. Supp. 1996). * Original rule filed Nov. 15, 1991, effective March 9, 1992. Rescinded and readopted: Filed Oct. 25, 1995, effective June 30, 1996. Emergency amendment filed May 1, 1997, effective May 12, 1997, expired Nov. 7, 1997. Amended: Filed May 1, 1997, effective Oct. 30, 1997.

* Original authority 1975, amended 1993, 1995.

4 CSR 200-4.200 Collaborative Practice

PURPOSE: This rule defines collaborative practice arrangement terms and delimits geographic areas; methods of treatment; review of services; and drug/device dispensing or distribution pursuant to prescription.

PUBLISHER'S NOTE: The publication of the full text of the material that the adopting agency has incorporated by reference in this rule would be unduly cumbersome or expensive. Therefore, the full text of that material will be made available to any interested person at both the Office of the Secretary of State and the office of the adopting agency, pursuant to section 536.031.4, RSMo. Such material will be provided at the cost established by state law.

- (1) For the purpose of these rules, the following definitions shall apply:
- (A) Advanced practice nurse—A registered professional nurse who is also an advanced practice nurse as defined in section 335.016(2), RSMo;
- (B) Collaborative practice arrangements—Refers to written agreements, jointly agreed upon protocols, or standing orders, all of which shall be in writing, for the delivery of health care services; and

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- (C) Registered professional nurse—A registered professional nurse as defined in section 335.016(9), RSMo, who is not an advanced practice nurse.
- (2) Geographic Areas.
- (A) The collaborating physician in a collaborative practice arrangement shall not be so geographically distanced from the collaborating registered professional nurse or advanced practice nurse as to create an impediment to effective collaboration in the delivery of health care services or the adequate review of those services.
- (B) The use of a collaborative practice arrangement by an advanced practice nurse who provides health care services that include the diagnosis and initiation of treatment for acutely or chronically ill or injured persons shall be limited to practice locations where the collaborating physician, or other physician designated in the collaborative practice arrangement, is no further than fifty (50) miles by road, using the most direct route available, from the collaborating advanced practice nurse if the advanced practice nurse is practicing in federally designated health professional shortage areas (HPSAs). Otherwise, in non-HPSAs, the collaborating physician and collaborating advanced practice nurse shall practice within thirty (30) miles by road of one another. The provision of the above specified health care services pursuant to a collaborative practice arrangement shall be limited to only an advanced practice nurse.
- (C) An advanced practice nurse who desires to enter into a collaborative practice arrangement to provide health care services that include the diagnosis and treatment of acutely or chronically ill or injured persons at a location where the collaborating physician is not continuously present shall practice at the same location with the collaborating physician for a period of at least one (1) calendar month before the collaborating advanced practice nurse practices at a location where the collaborating physician is not present. The provision of the above specified health care services pursuant to a collaborative practice arrangement shall be limited to only an advanced practice nurse.
- (3) Methods of Treatment.
- (A) The methods of treatment and the authority to administer, dispense, or prescribe drugs delegated in a collaborative practice arrangement between a collaborating physician and collaborating registered professional nurse or advanced practice nurse shall be within the scope of practice of each professional and shall be consistent with each professional's skill, training, education, and competence.
- (B) The collaborating physician shall consider the level of skill, education, training, and competence of the collaborating registered professional nurse or advanced practice nurse and ensure that the delegated responsibilities contained in the collaborative practice arrangement are consistent with that level of skill, education, training, and competence.
- (C) The methods of treatment and the authority to administer, dispense, or prescribe drugs delegated to the collaborating registered professional nurse or advanced practice nurse in a collaborative practice arrangement shall also be consistent with the scope of practice of the collaborating physician.
- (D) Guidelines for consultation and referral to the collaborating physician or designated health care facility for services or emergency care that is beyond the education, training, competence, or scope of practice of the collaborating registered professional nurse or advanced practice nurse shall be established in the collaborative practice arrangement.
- (E) The methods of treatment and authority to administer, dispense, or prescribe drugs delegated to the collaborating registered professional nurse in a collaborative practice arrangement shall not be further delegated to any other person except that the individuals identified in sections 338.095 and 338.198, RSMo may communicate prescription drug orders to a pharmacist.
- (F) The methods of treatment, including any authority to administer or dispense drugs, delegated in a collaborative practice arrangement between a collaborating physician and a collaborating registered professional nurse shall be delivered only pursuant to a written agreement, jointly agreed-upon protocols, or standing orders that shall describe a specific sequence of orders, steps, or procedures to be followed in providing patient care in specified clinical situations.
- (G) The methods of treatment, including any

authority to administer, dispense, or prescribe drugs, delegated in a collaborative practice arrangement between a collaborating physician and a collaborating advanced practice nurse shall be delivered only pursuant to a written agreement, jointly agreed-upon protocols, or standing orders that are specific to the clinical conditions treated by the collaborating physician and collaborating advanced practice nurse.

- (H) The collaborative practice arrangement between a collaborating physician and a collaborating registered professional nurse or advanced practice nurse shall be signed and dated by the collaborating physician and collaborating registered professional nurse or advanced practice nurse before it is implemented, signifying that both are aware of its content and agree to follow the terms of the collaborative practice arrangement. The collaborative practice arrangement and any subsequent notice of termination of the collaborative practice arrangement shall be in writing and shall be maintained by the collaborating professionals for a minimum of eight (8) years after termination of the collaborative practice arrangement. The collaborative practice arrangement shall be reviewed and revised as needed by the collaborating physician and collaborating registered professional nurse or advanced practice nurse.

- (I) Methods of treatment delegated and authority to administer, dispense, or prescribe drugs shall be subject to the following:

1. The physician retains the responsibility for ensuring the appropriate administering, dispensing, prescribing and control of drugs utilized pursuant to a collaborative practice arrangement in accordance with all state and federal statutes, rules, or regulations;
2. All labeling requirements outlined in section 338.059, RSMo shall be followed;
3. Consumer product safety laws and Class B container standards shall be followed when packaging drugs for distribution;
4. All drugs shall be stored according to the *United States Pharmacopeia* (USP) recommended conditions;
5. Outdated drugs shall be separated from the active inventory;
6. Retrieval dispensing logs shall be maintained for all prescription drugs dispensed and shall include all information required by state and federal statutes, rules, or regulations;
7. All prescriptions shall conform to all applicable state and federal statutes, rules, or regulations and shall include the name, address, and telephone number of the collaborating physician and collaborating advanced practice nurse;
8. A registered professional nurse shall not, under any circumstances, prescribe drugs;
9. An advanced practice nurse shall not, under any circumstances, prescribe controlled substances. The administering or dispensing of a controlled substance by a registered professional nurse or

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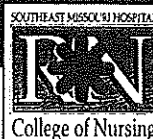
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advanced practice nurse in a collaborative practice arrangement shall be accomplished only under the direction and supervision of the collaborating physician, or other physician designated in the collaborative practice arrangement, and shall only occur on a case-by-case determination of the patient's needs following verbal consultation between the collaborating physician and collaborating registered professional nurse or advanced practice nurse. The required consultation and the physician's directions for the administering or dispensing of controlled substances shall be recorded in the patient's chart and in the appropriate dispensing log. These recordings shall be made by the collaborating registered professional nurse or advanced practice nurse and shall be co-signed by the collaborating physician following a review of the records;

10. An advanced practice nurse or registered professional nurse in a collaborative practice arrangement may only dispense starter doses of medication to cover a period of time for seventy-two (72) hours or less with the exception of Title X family planning providers or publicly funded clinics in community health settings that dispense medications free of charge. The dispensing of drug samples, as defined in 21 U.S.C. section 353 (c)(1), is permitted as appropriate to complete drug therapy; and

11. The medications to be administered, dispensed, or prescribed by a collaborating registered professional nurse or advanced practice nurse in a collaborative practice arrangement shall be consistent with the education, training, competence, and scopes of practice of the collaborating physician and collaborating registered professional nurse or advanced practice nurse.

(J) When a collaborative practice arrangement is utilized to provide health care services for conditions other than acute self-limited or well defined problems, the collaborating physician, or other physician designated in the collaborative practice arrangement, shall see the patient for evaluation and approve or formulate the plan of treatment for new or significantly changed conditions as soon as is practical, but in no case more than two (2) weeks after the patient has been seen by the collaborating advanced practice nurse or registered professional nurse.

(K) Nothing in these rules shall be construed to permit medical diagnosis of any condition by a registered professional nurse pursuant to a collaborative practice arrangement.

(4) Review of Services.

(A) In order to assure true collaborative practice and to foster effective communication and review of services, the collaborating

physician, or other physician designated in the collaborative practice arrangement, shall be immediately available for consultation to the collaborating registered professional nurse or advanced practice nurse at all times, either personally or via telecommunications.

(B) The collaborating physician shall review the work, records, and practice of the health care delivered pursuant to a collaborative practice arrangement at least once every two (2) weeks. This review shall be documented by the collaborating physician. This subsection shall not apply to the situation described in subsection (4)(E) below or during the time the collaborating physician and collaborating advanced practice nurse are practicing together as required in subsection (2)(C) above.

(C) If a collaborative practice arrangement is used in clinical situations where a collaborating advanced practice nurse provides health care services that include the diagnosis and initiation of treatment for acutely or chronically ill or injured persons, then the collaborating physician shall be present for sufficient periods of time, at least once every two (2) weeks, except in extraordinary circumstances that shall be documented, to participate in such review and to provide necessary medical direction, medical services, consultations, and supervision of the health care staff. In such settings the use of a collaborative practice arrangement shall be limited to only an advanced practice nurse and the physician shall not enter into a collaborative practice arrangement with more than three (3) full-time equivalent advanced practice nurses.

(D) The collaborating physician and collaborating registered professional nurse or advanced practice nurse shall determine an appropriate process of review and management of abnormal test results which shall be documented in the collaborative practice arrangement.

(E) In the case of collaborating physicians and collaborating registered professional nurses or advanced practice nurses practicing in settings which provide care to well patients or to those with narrowly circumscribed conditions in public health clinics or community health settings that provide population-based health services limited to immunizations, well child care, human immunodeficiency virus (HIV) and sexually transmitted disease care, family planning, tuberculosis control, cancer and other chronic disease and wellness screenings, services related to epidemiologic investigations and prenatal care, review of services shall occur as needed and set forth in the collaborative practice arrangement. If the services provided in such settings include diagnosis and the initiation of treatment of any other disease or injury,

then the provisions of subsection (4)(C) shall apply.

(F) The process and documentation of review shall be on file and maintained in the collaborative practice setting.

(G) The Missouri State Board of Registration for the Healing Arts and the Missouri State Board of Nursing separately retain the right and duty to discipline their respective licensees for violations of any state or federal statutes, rules, or regulations regardless of the licensee's participation in a collaborative practice arrangement.

(5) Population-Based Public Health Services.

(A) In the case of the collaborating physicians and collaborating registered professional nurses or advanced practice nurses practicing in association with public health clinics that provide population-based health services limited to immunizations, well child care, HIV and sexually transmitted disease care, family planning, tuberculosis control, cancer and other chronic disease and wellness screenings, services related to epidemiologic investigations and related treatment, and prenatal care, the geographic areas, methods of treatment and review of services shall occur as set forth in the collaborative practice arrangement. If the services provided in such settings include diagnosis and initiation of treatment of disease or injury not related to population-based health services, then the provisions of sections (2), (3), and (4) above shall apply.

AUTHORITY: sections 334.104.3, RSMo 1994 and 335.036, RSMo Supp. 1997.* Original rule filed Jan. 29, 1996, effective Sept. 30, 1996. Amended: Filed April 1, 1998, effective Oct. 30, 1998.

*Original authority: 334.104, RSMo 1993 and 335.036, RSMo 1975, amended 1981, 1985, 1993, 1995.


CHAPTER 5 - DEFINITIONS

4 CSR 200-5.010 Definitions

PURPOSE: This rule provides definitions of terms used by the Missouri State Board of Nursing.

(1) The definition based upon Chapter 335 RSMo is used by the Missouri State Board of Nursing. Proper supervision means the general overseeing and the authorizing to direct in any given situation. This includes orientation, initial and ongoing direction, procedural guidance and periodic inspection and evaluations.

AUTHORITY: Chapter 335, RSMo (1986). Original rule filed Oct. 14, 1981, effective Jan. 14, 1982. Amended: Filed March 15, 1983, effective June 11, 1983.



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